F0600000621

(Requestor's Name)
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PICK-UP WAIT MAIL
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(Document Number)
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COVER LETTER

	0012	KLETTER			
-	TO: New Filing Section Division of Corporations				
	SUBJECT: FV LR INTERNATIONAL				
<u>-</u>		oration - must include suffix)			
	Dear Sir or Madam:				
	The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.				
	Please return all correspondence concerning this matter to the following:				
• •	ELLA GOODWIN	_			
	(Name of Person)				
	FV LR INTERNATIONAL				
	(Firm	n/Company)			
	2928 WELLINGTON CIRCLE SUITE 201				
Page Page 1	`	Address)			
	TALLAHASSEE FL 32309				
= 1 - 1 - 1	(City/S	ate and Zip code)			
	For further information concerning this matter, ple	ase call:			
	ELLA GOODWIN at (85	0 668-2211			
<u>.</u>	(Name of Person) (A	rea Code & Daytime Telephone Number)			
	STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314				
	Enclosed is a check for the following amount:				
/ <u>-</u>	\$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & S87.50 Filing Fee, Certified Copy Certified Copy Certified Copy			



January 23, 2006

FRANK VISCONTI 2928 WELLINGTON CIRCLE SUITE 201 TALLAHASSEE, FL 32309

SUBJECT: FV LR INTERNATIONAL

Ref. Number: W06000003241

We have received your document for FV LR INTERNATIONAL and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6934.

Loria Poole Document Specialist

Letter Number: 606A00004746



APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN RI	COMPLIANCE EGISTER A FORI	WITH SECTION 607.1503, FLORIDA S EIGN CORPORATION TO TRANSACT	STATUTES, THE FOLLOWING IS SUE BUSINESS IN THE STATE OF FLORI	MITTEL DA:	070	
1.	FV LR INT	ERNATIONAL INCORPOR	ATEN) 	JAN	
, <u>†</u> -	(Enter name of con	rporation; must include "INCORPORATED		55.2	30	
	"Inc.," "Co.," "Coi	rp," "Inc," "Co," or "Corp.")		H H		<u>.</u>
				Ξω	<u>⊋</u> ယ္	-
	(If name unavailal	ble in Florida, enter alternate corporate name	e adopted for the purpose of transacting bus	siness in I		
2	GRAND C		98-0464905	A	OI	_
•	(State or country u	nder the law of which it is incorporated)	(FEI number, if applicable	le)		_
4.	JULY 19, 2	2005	PERPETUAL			
	(Date o	of incorporation)	(Duration: Year corp. will cease to exist	t or "perp	etual")	
6.	JANUARY	6, 2006				
			in Florida, if prior to registration) [502, F.S., to determine penalty liability)			
7	2928 WELI	LINGTON CIRCLE SUITE	201 TALLAHASSEE FL 32	2309		
· - <u>-</u>		(Principal office add	dress)	,		
	2928 WELI	LINGTON CIRCLE SUITE :	201 TALLAHASSEE FL 3	2309		
		(Current mailing ad	dress)			_
8.	YACHT OV	WNERSHIP FOR CORPOR	ATE USE			_
•	(Purpose(s)	of corporation authorized in home state or o	country to be carried out in state of Florida)	J		
9.	Name and street	address of Florida registered agent: (P.	O. Box NOT acceptable)			
	Name:	FRANK VISCONTI				
Q ₁	ffice Address:	2928 WELLINGTON CIRC	CLE SUITE 201			
		TALLAHASSEE	, Florida 32309			
		(City)	(Zip code)			
• •						

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

- 11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.
- 12. Names and business addresses of officers and/or directors:

A. DIRECTORS
Chairman: FRANK VISCONTI
Address: 2928 WELLINGTON CIRCLE SUITE 201 TALLAHASSEE FL 32309
VC Cli
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
B. OFFICERS
President: FRANK VISCONTI
Address: 2928 WELLINGTON CIRCLE SUITE 201
TALLAHASSEE FL 32309
Vice President:
Address:
0
Secretary:
Address:
Treasurer:
Address:
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13. (Signature of Director or Officer listed in number 12 of the application)
(Signature of Director of Officer fisted in number 12 of the application) FRANK VISCONTI PRESIDENT

(Typed or printed name and capacity of person signing application)

