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STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

17 NOV -3 PM 3:30

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S. WARREN

NOV 07 2017

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** VITANELLA, INC.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" 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:

GIUSEPPE VITAGLIANO

Name of Person

VITANELLA, INC.

Firm/Company

398 E HICKORY AVENUE

Address

CRESTVIEW FL 32536

City/State and Zip code

giuseppe.picnic@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Giuseppe Vitagliano

850

398-1045

at ( )

Name of Person

Area Code

Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee

☒ \$78.75 Filing Fee &  
Certificate of Status

☐ \$78.75 Filing Fee &  
Certified Copy

☐ \$87.50 Filing Fee,  
Certificate of Status &  
Certified Copy

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

VITANELLA, INC.

1. \_\_\_\_\_  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

VITANELLA INC OF FLORIDA

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. CALIFORNIA 3. 45-2049525  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. April 12, 2011 5. Perpetual  
(Date of incorporation) (Date of duration, if other than perpetual)

6. 11/01/2017  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 398 E HICKORY AVENUE, CRESTVIEW FL 32536  
(Principal office address)

SAME

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

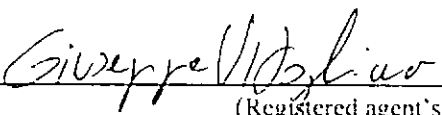
Name: GIUSEPPE VITAGLIANO

Office Address: 4353 PARKWOOD LN E

NICEVILLE 32578  
(City) (Zip code)

9. 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)

10. 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.

FILED  
17-NOV-3 PM 3:38  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

11. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: GIUSEPPE VITAGLIANO

Address: 4535 PARKWOOD LANE E  
NICEVILLE FL 32578

Vice Chairman: DANIELA QUIRICO

Address: 4535 PARKWOOD LANE E  
NICEVILLE FL 32578

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: GIUSEPPE VITAGLIANO

Address: 4535 PARKWOOD LANE E  
NICEVILLE FL 32578

Vice President: GIUSEPPE VITAGLIANO

Address: 4535 PARKWOOD LANE E  
NICEVILLE FL 32578

Secretary: GIUSEPPE VITAGLIANO

Address: 4535 PARKWOOD LANE E, NICEVILLE FL 32578

Treasurer: DANIELA QUIRICO

Address: 4535 PARKWOOD LANE E, NICEVILLE FL 32578

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. Giuseppe Vitagliano  
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. GIUSEPPE VITAGLIANO

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

FILED  
17 NOV 23 PM 3:59  
STATE  
TALLAHASSEE, FLORIDA

**State of California**  
**Secretary of State**

**CERTIFICATE OF STATUS**

ENTITY NAME:

VITANELLA, INC.

FILE NUMBER: C3368581  
FORMATION DATE: 04/12/2011  
TYPE: DOMESTIC CORPORATION  
JURISDICTION: CALIFORNIA  
STATUS: ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California,  
hereby certify:

The records of this office indicate the entity is authorized to  
exercise all of its powers, rights and privileges in the State of  
California.

No information is available from this office regarding the financial  
condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate  
and affix the Great Seal of the State of  
California this day of October 25, 2017.

A handwritten signature in black ink, appearing to read "Alex Padilla".

ALEX PADILLA  
Secretary of State