

21600217300

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

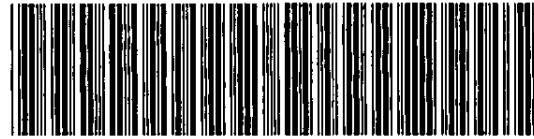
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA
16 NOV 23 PM 4:56

M. MOON
NOV 23 2016



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 14, 2016

VITALIJ SHALKOVSKY
6811 THOMAS DRIVE
PANAMA CITY BEACH, FL 32408

SUBJECT: VS SURFACES LLC.
Ref. Number: W16000076991

16 NOV 23 PM 12:41
RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

We have received your document for VS SURFACES LLC. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with 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) 245-6052.

Matthew T Moon
Regulatory Specialist II

Letter Number: 616A00024381

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TALLAHASSEE, FLORIDA
16 NOV 23 PM 4:56

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: VS Surfaces LLC.

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Vitalij Shalkovsky

Name of Person

VS Surfaces LLC.

Firm/Company

6811 Thomas Drive

Address

Panama City Beach

City/State and Zip Code

32408

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

For further information concerning this matter, please call:

Vitalij Shalkovsky

850

3195509

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:



\$125.00 Filing Fee



\$130.00 Filing Fee &
Certificate of Status



\$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)



\$160.00 Filing Fee
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address

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

Street Address

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

VS Surfaces LLC.

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

6811 Thomas drive

Panama City Beach, Fl. 32408

6811 Thomas Drive

Panama City Beach, fl 32408

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

vitalij shalkovsky

Name

6811 thomas drive

Florida street address (P.O. Box **NOT** acceptable)

panama City Beach

Fl

32408

City

State

Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..



Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

Name and Address:

Vitalij Shalkovsky
6811 Thomas Drive
Panama City Beach, fl 32408

MGR

Hermine Gevorgyan
6811 Thomas Drive
Panama City Beach, Fl, 32408

(Use attachment if necessary)

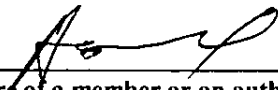
ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.
This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
I am aware that any 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.

Vitalij Shalkovsky

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

16 NOV 23 PM 4: 56

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STATE
SECRETARY
TALLAHASSEE, FLORIDA