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SECRETARY OF STATE
DIVISION OF CORPORATION

T. HAMPTON

APR - 8 2010

EXAMINER

COVER LETTER

Division of Corporations
SUBJECT: VISTA FINANCIAL GROUP
Name of Limited Liability Company
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida
Please return all correspondence concerning this matter to the following:
John Thornton, ESQ.
Do CAMPO & THORNTON, P.A.
100 S.E. 2ND STREET, SUITE 2700
MIAMI FL 33/3/
SERGEI- LEWS @ YAHOO. COM
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
John Thornton, ESQ, BOS, 3586600
Name of Person Area Code & Daytime Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Clifton Building Tallahassee, FL 32314 Cloth Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate Certificate of Status Certified Copy



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

10 APR -7 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

March 25, 2010

JOHN THORNTON, ESQ DO CAMPO & THORNTON, P.A. 100 SE 2ND ST - STE 2700 MIAMI, FL 33131

SUBJECT: FLORIDA VISTA FINANCIAL LLC

Ref. Number: W10000014870

We have received your document for FLORIDA VISTA FINANCIAL 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):

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$777.50.

Please return the corrected original and one copy of 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) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 610A00007360

WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

We, the undersigned, do hereby certify that we are the Managers and/or Managing
Members of V15TA FINANCIAL GROUP, LCC (Name of Limited Liability Company)
a limited liability company duly organized and existing under the laws of
DECAMARE
DECAWARE (State or Country of Organization)
Because the name of this foreign limited liability company does not satisfy the
requirements of the s. 608.406, F.S., the limited liability company hereby adopts the
following name to transact business in the state of Florida:
FLORIDA VISTA FINANCIAL LLC (Name to be used by limited liability company in Florida, NOTE: Name must end with Limited Liability
Company, L.L.C., or LLC.)
Date: $\frac{1-27-10}{}$
Signature(s) of Manager(s) and/or Managing Member(s):
SERGE TEWS
10 APR -7 P
그 않는 것이 없는 것이 없다.

CR2E122 (7/07)

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS BY THE STATE OF FLORIDA:
1 VISTA FINANCIAL GROUP LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
. Florida Vista Financia LLC
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")
2. JEINARE (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)
company is organized)
4. July 2008 5. PERDETUR (Date of Organization) [Duration: Year limited liability company will cease to exist or "perpetual")
August 7,2008 exist or "perpetual")
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
1 1220 N. MARKET STREET, SUITE 808 _ Eu
Wilmington, DE 19801 (Street Address of Principal Office)
(Street Address of Principal Office)
8. If limited liability company is a manager-managed company, check here
9. The name and usual business addresses of the managing members or managers are as follows:
SERVE TEWS
10225 COLLINS AVE, #904
BAC HARBOUR FL 33154
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)
No State of the St
11. Nature of business or purposes to be conducted or prompted in Florida:
INVESTMENTS >
Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3) F.S., the execution of this document constitutes an affirmation under the penalties of perform that the facts stated herein are true.)
SERGE TEWS
- Pyped or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

FROUP LLC

2. The name and the Florida street address of the registered agent and office are:	ed in the state of Florida is:	FLOR
	ddress of the registered agent and office are:	
John Thomben, DO CAMPO & THORNTON, P.A.	MPO & SHORNTON, P.A.	John Thornton,
100 S.E. 2 MD STREET, SUITE 2700	E. 2 MD STREET, SUITE 2700	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	reet Address (P.O. Box NOT ACCEPTABLE)	
MIAMI B 33/3/		
City/State/Zip	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 608, Florida Statutes.

(Signature)

1. The name of the Limited Liability Company is;

FINANCIA

\$ 100.00 Filing Fee for Application

Designation of Registered Agent \$ 25.00

30.00 Certified Copy (optional) 5.00

Certificate of Status (optional)

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "VISTA FINANCIAL GROUP LLC" IS DULY

FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE TWENTY-NINTH DAY OF JANUARY, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "VISTAFINANCIAL GROUP LLC" WAS FORMED ON THE NINETEENTH DAY OF FEBRUARY, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

4506112 8300

100090128

AUTHENTICATION: 7788721

DATE: 01-29-10

You may verify this certificate online at corp.delaware.gov/authver.shtml