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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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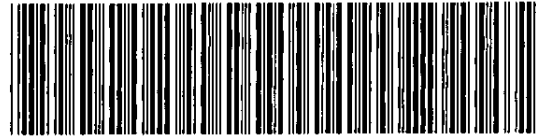
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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B. BOSTICK
MAY 22 2012
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ITACCESSORIES, LLC

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:

MR. JOSE L. VILLAMIL-CASANOVA, ESQ.

Name of Person

JOSE L. VILLAMIL-CASANOVA LAW OFFICE

Firm/Company

MCS PLAZA SUITE 804, 255 PONCE DE LEON AVENUE

Address

SAN JUAN, PR 00917-1908

City/State and Zip Code

ico3370@gmail.com

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

For further information concerning this matter, please call:

JOSE L. VILLAMIL-CASANOVA at (787) 751-8115

Name of Person

Area Code & Daytime Telephone Number

MAILING ADDRESS:

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

STREET ADDRESS:

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

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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 ☒ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. ITACCESSORIES, LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

N/A

(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. PUERTO RICO

(Jurisdiction under the law of which foreign limited liability company is organized)

3. N/A

(FEI number, if applicable)

4. FEBRUARY 8, 2012

(Date of Organization)

5. PERPETUAL

(Duration: Year limited liability company will cease to exist or "perpetual")

6. N/A

(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. 255 OBISPADO STREET, LA ALHAMBRA, PONCE, PR 00716

(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:

MIGUEL A. VASSALLO


255 OBISPADO STREET, LA ALHAMBRA, PONCE, PR 00716

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TALLAHASSEE, FLORIDA

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.)

11. Nature of business or purposes to be conducted or promoted in Florida: _____

EXPORT, SALE, DISTRIBUTION AND MARKETIG OF SHOES, PURSES AND LUGGAGE.



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 perjury that the facts stated herein are true. 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.)

MIGUEL A. VASSALLO

Typed 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.

1. The name of the Limited Liability Company is:

ITACCESSORIES, LLC

If unavailable, the alternate to be used in the state of Florida is:

N/A

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

MIGUEL A. VASSALLO

(Name)

2082 NW 18 AVENUE

Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

MIAMI

FL 33142

City/State/Zip

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TALLAHASSEE, FLORIDA

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)

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)



Government of Puerto Rico
Department of State
San Juan, Puerto Rico

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATE OF EXISTENCE

I, **KENNETH D. McCLINTOCK**, Secretary of State of the Commonwealth of Puerto Rico,

CERTIFY: That, according to our records “**ITACCESSORIES, LLC**”, registration number **3727**, is a limited liability company organized in accordance with the General Corporations Law of Puerto Rico on **February 8, 2012 at 3:24 p.m.**

This certification does not imply that this company has paid the annual fees, pursuant to the requirements of Article 21.03 of the General Corporation Law. If you need to know if such annual fees have been paid, you must request a Certificate of Good Standing.

IN WITNESS WHEREOF, I hereby
sign and cause the Great Seal of the
Commonwealth of Puerto Rico to be
affixed on it, in the city of San Juan,
today, May 17, 2012.

KENNETH D. McCLINTOCK
Secretary of State



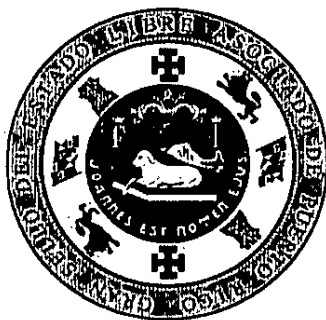
Government of Puerto Rico
DEPARTMENT OF STATE
San Juan, Puerto Rico

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TALLAHASSEE, FLORIDA

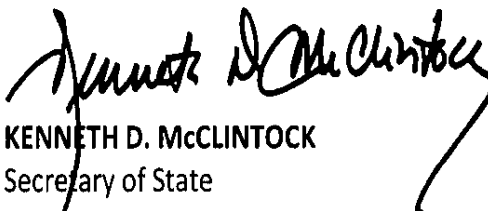
CERTIFICATE OF GOOD STANDING

I, **KENNETH D. McCLINTOCK**, Secretary of State of the Government of Puerto Rico,

CERTIFY: That, pursuant to Puerto Ricos General Law of Corporations, **ITACCESSORIES, LLC**, register number **3727**, a Limited Liability Company organized under the laws of Puerto Rico, on **May 02, 2012**, is in good standing until **April 15, 2013**, date on which its first Annual Fee is due.



IN WITNESS WHEREOF, I hereby sign this certificate, in the City of San Juan, today, **May 02, 2012**.


KENNETH D. McCLINTOCK
Secretary of State

To validate this certificate go to: <http://www.estado.gobierno.pr>

This certificate can be validated up to 2 times before its expiration date of 31-Jul-2012.

Certificate Validation Number: **20965-71956100**