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(Requestor's Name)	
(Address)	
(Address)	_
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	
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SECRETARY OF STATE
TALLAHASSEE, FI 1986.

D. BRUCE

SEP 1 0 2012

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Adeste LLC		
Name of Limited Liability Company		
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Continuous Existence, and check are submitted to register the above referenced foreign limited liability company to transact business		
Please return all correspondence concerning this matter to the following:		
Paolo Motta		
Name of Person		
Adeste LLC		
Firm/Company		
7001 Interbay Blvd. Unit 315	_	
Address	2 S	
Tampa, FL 33616	SEP -7	FAZ
City/State and Zip Code		
pmotta@adestesoftware.com	<u>~</u>	
E-mail address: (to be used for future annual report notification)	PM 12: 03	
For further information concerning this matter, please call:	ω	
Paolo Mottaat (813) 402-2285		
Name of Person Area Code & Daytime Telephone Number		
MAILING ADDRESS: Division of Corporations STREET ADDRESS: Division of Corporations		
Registration Section Registration Section P.O. Box 6327 Clifton Building		
Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301		
Enclosed is a check for the following amount: \$\int\\$\$125.00 \text{ Filing Fee} \text{ \$\int\\$}\$		

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

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

				· · · · · · · · · · · · · · · · · · ·	 .	
(If name unavailable, enter alternate name ad consent of the managers or managing member Company," "L.L.C," "LLC.")						tten
2. Delaware		45-3831360				-
(Jurisdiction under the law of which foreig company is organized)	n limited liability	(FEI	number, if applicable	le)		
_{4.} 10/19/2011	5.	perpetual				
(Date of Organization)		(Duration: Year li exist or "perpetua	mited liability comp. !")	any will cease	to	
6						
(Date first transa (See sections 608.)	cted business in Flori 501 & 608.502 F.S. to	da, if prior to registro determine penalty	ation.) liability)	TAI	1 2	
7. 7001 Interbay Blvd. Unit 31	5			LL A	2 SEP	
Tampa, FL 33616				TAS:		
1411,54,712,000,10	(Street Address of	Principal Office)		- 300 Fig.	7	FILED
8. If limited liability company is a ma				E SIAIT	至12:03	co, c
9. The name and usual business addre	esses of the manag	ing members or	managers are as f	ollows:	w	
Paolo Motta						
7001 Interbay Blvd. Unit 31	5				····	
Tampa, FL 33616						
 Attached is an original certificate of existence the jurisdiction under the law of which it is orgateral translation of the certificate under oath of the translation. 	nized. (A photocopy is	snot acceptable. If th	-	-		sin
11. Nature of business or purposes to	be conducted or p	romoted in Flori	da:			
software development)and s	ales				<u> </u>	
taols	& Mit					
	nember or an auth	•				
(In accordance with section 608.4 penalties of perjury that the fact						

Typed or printed name of signee

Paolo Motta

document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

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.

Adeste L	LC Limited Liability Company is:		
If unavailable	e, the alternate to be used in the state of Florida is:		
2. The name	and the Florida street address of the registered agent and office are:	12 SEP SECREI TALLAH;	•
	(Name)	JAR ASS	71.
	7001 Interbay Blvd. Unit 315 Florida Street Address (P.O. Box NOT ACCEPTABLE)	Y OF STATE EE. FLORIDA	LED ROYE
	Tampa, FL 33616		
	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.

Pals E. With (Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 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 "ADESTE 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-THIRD DAY OF AUGUST, A.D. 2012.

5054082 8300

120963585

AUTHENTY CATION: 9801077

DATE: 08-23-12

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