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COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT:	Vitcom 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:

Mordy Gross		
Name of Person		
Law Offices of Mordy Gross		
Firm/Company	,	
221 Pine St		
Address		[]
Lakewood, NJ 08701	(1) ~~	-9 F
City/State and Zip Code	FL 5]	PH 12:
mordygross@gmail.com		:: 32
E-mail address: (to be used for future annual report notification)	••	

For further information concerning this matter, please call:

Mordy Gross	484 6800768
Name of Person	Area Code & Daytime Telephone Number

MAILING ADDRESS:

Area Code & Daytime Telephone Number

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

Enclosed is a check for the following amount:

□ \$130.00 Filing Fee & □ \$125.00 Filing Fee

□ \$155.00 Filing Fee & Certificate of Status Certified Copy

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

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

IN COMPLIANCE WITH SECTION 608 503 FLORIDA STATLITES THE FOLLOWING IS SURMITTED TO REGISTER A FORFICIN

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE	E STATE OF FLORIDA:
1. Vitcom LLC (Name of Foreign Limited Liability Company; must include the company).	le "Limited Liability Company" "[. L.C.," or "[. L.C.")
(Name of Foreign Emitted Endomly Company, must mode	20 Elimited Elacinty Company, District, Cr. B201,
(If name unavailable, enter alternate name adopted for the purpos consent of the managers or managing members adopting the altern Company," "L.L.C," "LLC.")	e of transacting business in Florida and attach a copy of the written nate name. The alternate name must include "Limited Liability
_{2.} New York	20-4751388
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4. April 25, 2005	perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6.	
(Date first transacted business in Flo (See sections 608.501 & 608.502 F.S.	rida, if prior to registration.) to determine penalty liability)
7 1428 36th Street, Suite 209	SS 9
	T - 11
Brooklyn, NY 11218 (Street Address)	{ }
	_ జైగ్ బ్ల
8. If limited liability company is a manager-managed	company, check here
9. The name and usual business addresses of the mana	aging members or managers are as follows:
Zalmen Ashkenazi, 1428 36th St, Si	uite 209. Brooklyn, NY 11218
10. Attrached is an original contificate of anistance no more than 00.	days old, duly authenticated by the official having custody of records in
the jurisdiction under the law of which it is organized. (A photocop	· · · · · · · · · · · · · · · · · · ·
translation of the certificate under oath of the translator must be sub	mitted.)
11. Nature of business or purposes to be conducted or	promoted in Florida:
telecommunications	
//// ()	
Signature of a member or of au	thorized representative of a member.
	ution of this document constitutes an affirmation under the
penalties of perjury that the facts stated herein are tru	e. I am aware that any false information submitted in a a third degree felony as provided for in s.817.155, F.S.)
Monly Gross es	
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:	
Vitcom	LLC	
If unavailable	, 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:	AN SEP
	Incorp Services, Inc.	-9 -9 -388
	(Name)	
	17888 67th Court North	PMI2: 32 OF STATE OF FLORIDA OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	— 5 2
	Loxahatchee _{FL} 33740	
	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.

or behalf of Incorp Services in a

\$ 1	00.00	Filing Fee for Application
\$	25.00	Designation of Registered Agent
\$	30.00	Certified Copy (optional)
\$	5.00	Certificate of Status (optional)

State of New York } ss: Department of State

I hereby certify, that VITCOM LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 04/25/2006, and that the Limited Liability Company is existing so far as shown by the records of the Department.

The Biennial Statement is past due.



WITNESS my hand and the official seal of the Department of State at the City of Albany, this 22nd day of August two thousand and thirteen.

Executive Deputy Secretary of State