Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H14000045958 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

: (850)617-6383 Fax Number

RE-SUBMIT

From:

Account Name

Account Number : FCA00000023

C T CORPORATION SESTEM PORTION OF GING TING daie of submission 2/25

Phone Fax Number

: (850)222-1092 : (850)878-5368

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Foreign Limited Liability Company TREMONTI CONSULTING LLC

Certificate of Status	0
Certified Copy	0
Page Count	05 C
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

FEB 2 7 2016

A. LUNT

850-817-8381

2726/2014 8:48:08 AM PAGE 1/001 Fax Server



February 26, 2014

FLORIDA DEPARTMENT OF STATE Division of Corporations

CT

SUBJECT: TREMONTI CONSULTING LLC

REF: W14000012406

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refex this document until the quality has been improved.

If you have any further questions concerning your document, please call (850) 245-6051.

Justin M Shivers Regulatory Specialist II Registration/Qualification Section

FAX Aud. #: E14000045958 Letter Number: 114A00004246

DF_SUBMIT

Pleat filing date مراد date عطرد

COVER LETTER	
TO: Registration Section Division of Corporations	
SUBJECT: TREMONTI CONSULTING LLC	
Name of Limited Liability Company	
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact B Existence, and check are submitted to register the above referenced foreign limited liability company Please return all correspondence concerning this matter to the following:	usiness in Florida," Certificate of any to transact business in Florida
IOELLE CHURIK	
Name of Person	
NRAI CORPORATE SERVICES, INC.	201
Firm/Company	
200 WEST ADAMS STREET, SUITE 2007	2014 FEB 25
Address	City
CHICAGO, IL 60606	. F. S. 32
City/State and Zip Code	TAILS AND A STATE OF THE STATE
HSTAECKER@TREMONTICONSULTING.COM	<u>→</u>
E-mail address: (to be used for future annual report notification)	·
For further information concerning this matter, please call:	
JOELLE CHURIK at (312) 283-1715	···
Name of Contact Person Area Code Day time To	lephone 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	
	60.00 Filing Pec, Certificate Status & Certified Copy

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA

1. TREMONTI CONSULTING LLC (Name of Poreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC."	.")	_
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name mulliability Company," "L.L.C," or "LUC.")	ist include "	Limited
Um Abrita		
2. VIROINIA (Jurisdiction under the law of which foreign limited liability company is organized) (l'El number, if applicable)		
4. 01/01/2014		
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)		
5. 2944 HUNTER MILL DRIVE, SUITE 204		
	25	7 011
OAKTON, VA 22124 . (Street Address of Principal Office)	- 28	<u>—</u> जिल्ला
6. 2944 HUNTER MILL DRIVE, SUITE 204	TANA A	
0.	m=<	-cy
OAKTON, VA 22124 (Mailling Address)	<u> </u>	- ₹ []
	01 ES	- C
7. The name, title or capacity and address of the person(s) who has/have authority to manage	is/arc:	# ·
Gregory Sullivan, Member, 2944 Hunter Mill Drive, Suite 204, Oakton, VA 22124	1130	
		
Jan Heidjer Staecker, Member, 2944 Hunter Mill Drive, Suite 204, Oakton, VA 22124		
		 .
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticate having custody of records in the jurisdiction under the law of which it is organized. (A photocacceptable. If the certificate is in a foreign language, a translation of the certificate under oath must be submitted)	opy is no	ot
Signature of an authorized person		
(In accordance with section 605,0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the am oware that any false information submitted in a document to the Department of State constitutes of third degree fellow as provided for in	foots stated # £ 217.155, F.	verein are true. I .S.)
JAN HEIDJER STAECKER		
Typed or printed name of signce		

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), 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:		
TREMONTI CO	ONSULTING LLC		
If unavailable,	, the alternate to be used in the state of Florida is:		
2. The name a	and the Florida street address of the registered agent and office are:	2014 FEB	
	NRAI SERVICES, INC.	ís 🔁 💫	
	(Name)		П
	1200 South Pine Island Road	L (\(\sigma\) \ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	C
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	TATE ORIDA	
	Plantation FL 33324		
	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, Florida Statutes.

(Signature) JOBLE OHULLY ASST. SELBOTADY

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

Commontoealth & Hirginia



State Corporation Commission

CERTIFICATE OF FACT

I Certify the Following from the Records of the Commission:

That Tremonti Consulting LLC is duly organized as a limited liability company under the law of the Commonwealth of Virginia;

That the date of its organization is February 18, 2005; and

That the limited liability company is in existence in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.



Signed and Sealed at Richmond on this Date: February 24, 2014

Joel H. Peck, Clerk of the Commission

CISECOM

Control Number: 4.400

Document Control Number: 1402246170