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From:

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Account Number : I20010000062

Phone

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Foreign Limited Liability Company Sevita, LLC

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7/30/2014

COVER LETTER

TO:	Registration Section Division of Corporations		• • • • • • • • • • • • • • • • • • • •				
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SUDJE	ict. <u></u>		1 Liability Company				
Existen	closed "Application by Forcince, and check are submitted	to register the above refere	nced foreign limit				
Please	return all correspondence cor		tollowing: da Vasquez				
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			Address			L O	
	Glendale, CA 91210					9. 33	
		City/St	ate and Zip Code				
	sbogatoff@yal	hoo.com					
		E-mail address: (to he used	for future annual re	on notific	ation)		
For fur	ther information concerning	this matter, please call:					
	Imelda Vasquez	_	323	962-8	3600		
	Name of 0	Contact Person	Area Code	Da	ytime Telephone N	umber	
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	Divisior Registra Clifton 2661 Ex	T ADDRESS: a of Corporations ation Section Building secutive Center Cir asec, FL 32301	cle			
Enclos	sed is a check for the fol	lowing amount:					
Divio		□ \$130.00 Filing Fee & Certificate of Status	S155.00 Filing Certified Cop	_	□ \$160.00 Filid of Status &	ng Fee, Certi Certified Cop	

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 TRAN	NSACT BUSINESS IN THE STATE OF FLORIDA:
Sevita, LLC	
(Name of Foreign Limited Liability Company; m	nust include "Limited Linbility Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purp Liability Company," "L.L.C." or "LLC.")	xose of transacting business in Florida. The alternate name must include "Limited
, Delaware	_{3.} 46-5564860
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
company is organized)	; P = 51 . Po
4. (Date first transacted bus	siness in Florida, if prior to registration.) 05.0905, F.S. to determine penalty liability)
	English to the second s
_{5.} 8680 Baymeadows Rd. East,	, Apt.1226, Jacksonville, FL 32256
·	Address of Principal Office)
6 8680 Baymeadows Rd. East,	Apt.1226, Jacksonville, FL 32256
	ਤੁਜੋ ਲੂ
	(Mailing Address)
	(
7. The name, title or capacity and address of the	ne person(s) who has/have authority to manage is/are:
Sergey Bogatoff, MGR, 8680 Baymeado	ows Rd. East, Apt 1226, Jacksonville, FL 32256
)	In a Dat Frank And ADDC Trade-maille Ft. 22056
Victoria Bogatoff, MGR, 8680 Baymead	lows Rd. East, Apt.1226, Jacksonville, FL 32256
	e, no more than 90 days old, duly authenticated by the official
	der the law of which it is organized. (A photocopy is not
acceptable. If the certificate is in a foreign langumust be submitted)	uage, a translation of the certificate under oath of the translator
· · · · · · · · · · · · · · · · · · ·	h . [/]/
	Beschoff
	re of an authorized person
(In accordance with section 605.0203, F.S., the execution of this docum	ment constitutes an affirmation under the penalties of perjury that the facts stated herein are true, partment of State constitutes a third degree felony as provided for in \$.817.135, F.S.)
Sergey Bogatoff	;
Typed or p	printed name of signee

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.

Sevita,	le, the alternate to be used in the	ne state of Florida is:		
2. The num	e and the Florida street address	of the registered agent and office are:		
	Sergey Bogato	ff .		
		(Name)	が出る。	
	8680 Baymeadows Rd. East, Apt.#1226			
	Florida Street Ac	ddress (P.O. Box NOT ACCEPTABLE)	受所 公	
	Jacksonville	_{FL} 32256		
		City/State/Zip	,	
liability com registered a statutes rela	apany at the place designated in gent and agree to act in this capiting to the proper and complete bligations of my position as reg	I to accept service of process for the above st this certificate, I hereby accept the appointn pacity. I further agree to comply with the pro- performance of my duties, and I am familian istered agent as provided for in Chapter 605, nature)	nent as ovisions of all with and	
	\$ 100.00	2 22		
	\$ 25.00	Designation of Registered Agent		
	\$ 25.00	• • • • • • • • • • • • • • • • • • • •		

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "SEVITA, 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-SECOND DAY OF JULY, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SEVITA, LLC"
WAS FORMED ON THE TWENTY-SECOND DAY OF APRIL, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

5520625 8300

140982045

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

Jeffrey W. Bullock, Secretary of State

AUTHENTICATION: 1556071

DATE: 07-22-14