

orida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

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From:

Account Name : INCORP SERVICES INC

Account Number : I20120000007

Phone

Fax Number

: (702)866-2500 : (702)866-2689

**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 Vega Consulting LLC

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$155.00

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COVER LETTER

	tration Section on of Corporations		
SUBJECT:	ega Consulting LLC		
SOUNDCI: _		lame of Limited Liability Company	
			o Transact Business in Florida," Certificate of ability company to transact business in Florida
Please return al	ll correspondence concerning thi	matter to the following:	
		Melissa Gubler	
		Name of Person	
	InCorp Services, Inc.		
		Firm/Сотрапу	
	2360 Corporate Circle, 5	uite 400	
		Address	,
	Henderson, NV 89074		
		City/State and Zip Code	
	managedreports@incorp	com	mand
	E-mail add	ess: (to be used for future annual report n	otification)
For further info	ormation concerning this matter,	lease call:	海 田
	Melissa Gubler	702 86	66-2500 L F
	Name of Contact Person		Daytime Telephone Number
Divisi Regist P.O. B	LING ADDRESS: on of Corporations ration Section Box 6327 massee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	CORP. EL
	a check for the following at 15.00 Filing Fee 5130.00 Certifica		e & ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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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:

Vega Consulting LLC	
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	•
Vega Consulting US LLC	
If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Liminate Lindlity Company," "L.L.C," or "LLC.")	ited
2. Washington 3.	
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	
Upon Registration	
(Dute first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penuity liability)	
10800 N.E. 8th Street, Suite 220	
Bellevue, WA 98004	
(Street Address of Principal Office)	
10800 N.E. 8th Street, Suite 220	
Bellevue, WA 98004	
(Mailing Address)	
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: John Pope, Member 10800 N.E. 8th Street, Suite 220, Bellevue, WA 98004	
Nadia Biryukova, Member 10800 N.E. 8th Street, Suite 220, Bellevue, WA 98004	
The state of the s	
Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the offi aving custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not cceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the trans nust be submitted)	
Sought that would	
Signature of an authorized person accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein 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.)	n are true
Nadia Biryukova	
Typed or printed name of signee	

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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 nam	e of the Limited Liability C	ompany is:	
	le, the alternate to be used in ulting US LLC	n the state of Florida is:	
2. The nam	e and the Florida street add	ess of the registered agent and office are:	HE HE
_	InCorp Services, Inc.		2000 F E
	•	(Name)	一篇完選亡
	17888 67th Court Nort		
	Florida Stree	t Address (P.O. Box NOT ACCEPTABLE)	
٠	Loxahatchee	FL 33470	<u> </u>
		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.

Melissa Gubier on behalf of InCorp Services, Inc.
(Signature)

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

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WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

H150000 20400

Of Name of Limited Liability	Company)
a limited liability company duly organized and ex	xisting under the laws of
Washington	
(State or Country of Organization)	្រា (គ្នា កា
Because the name of this foreign limited liability	company does not satisfy the
the second contraction of the second	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
·	
·	
requirements of the s. 605.0112, F.S., the limited following name to transact business in the state o Vega Consulting US LLC	
following name to transact business in the state o	of Florida: .
following name to transact business in the state o Vega Consulting US LLC (Name to be used by limited liability company in Florida. NOTE	of Florida: .

CR2E122 (12/13)

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The State of Washington

Secretary of State

I, KIM WYMAN, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF EXISTENCE/AUTHORIZATION

OF

VEGA CONSULTING LLC

I FURTHER CERTIFY that the records on file in this office show that the above named Limited Liability Company was formed under the laws of the State of WA and was issued a Certificate Of Formation in Washington on 8/27/2003.

I FURTHER CERTIFY that as of the date of this certificate, VEGA CONSULTING LLC remains active and has complied with the filing requirements of this office.

Date: January 26, 2015

UBI: 602-321-241

Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

Kim Wyman, Secretary of State

