

M1500000 6037

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

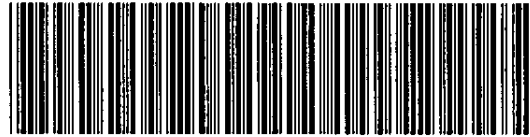
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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15 JUL 30 AM 11:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JUL 31 2015

T. HAMPTON

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Vector Foiltec 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:

Stella M. Alosi

\_\_\_\_\_  
Name of Person

Vector Foiltec, LLC

\_\_\_\_\_  
Firm/Company

55 Lane Road, Suite 110

\_\_\_\_\_  
Address

Fairfield, NJ 07004

\_\_\_\_\_  
City/State and Zip Code

stella.alosi@vector-foiltec.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Stella M. Alosi

862

702-8909

at ( )

\_\_\_\_\_  
Name of Contact Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone 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

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &  
Certificate of Status

☐ \$155.00 Filing Fee &  
Certified Copy

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

*Stella M. Alosi*

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. Vector Politec, LLC

(Name of Foreign 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 must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. New York

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 161608494

(FBI number, if applicable)

4. upon filing

(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 55 Lane Road, Suite 110

Fairfield, NJ 07004

(Street Address of Principal Office)

6. 55 Lane Road, Suite 110

Fairfield, NJ 07004

(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name:

InCorp Services, Inc.

Office Address:

17888 67th Court North

Loxahatchee

(City)

, Florida 33470

(Zip code)

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

*Jackie DeFilippis* Jackie DeFilippis on behalf of InCorp Services, Inc.  
(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Stella M. Alosi, Controller - 55 Lane Road, Fairfield, NJ 07004

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

*Stella M. Alosi*  
Signature of an authorized person

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am 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.

*Stella M. Alosi*  
Typed or printed name of signee

FILED  
15 JUL 30 AM 11:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**State of New York**  
**Department of State** } ss:

I hereby certify, that FOILTEC OF NORTH AMERICA, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 05/17/2001, and that the Limited Liability Company is existing so far as shown by the records of the Department.

A Certificate of Amendment FOILTEC OF NORTH AMERICA, LLC, changing its name to VECTOR FOILTEC, LLC, was filed 01/28/2008.



\*\*\*

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

*Anthony Giardina*

*Executive Deputy Secretary of State*