

m160000002144

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

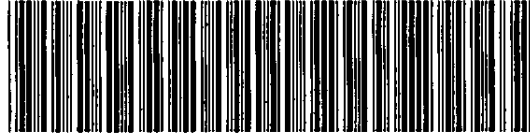
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900283265789

03/14/16--01039--027 **160.00

2016 MAR 14 P 4:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

MAR 15 2016

S MASON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Vision Auto Import, 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:

Sherilly Brache
Name of Person

AiS Shipping, Inc
Firm/Company

7320 NW 12 St # 113
Address

Miami, Florida 33126
City/State and Zip Code

as.shipping23@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sherilly Brache at (305) 917-5003
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

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: S.R.L.

1. Vision Autoimport, 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. _____ (Jurisdiction under the law of which foreign limited liability company is organized)
3. 1-30-39033-9 (FEI number, if applicable)

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

5. Quarte Road KM .3 1/2 Estancia Nueva, Moca
Española + Province, Moca Dominican Republic.
(Street Address of Principal Office)

6. 7320 NW 12st #113
Miami, FL 33126.
(Mailing Address)

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

Name: Sherilly Brache.

Office Address: 7320 NW 12st #113.

Miami, FL 33126
(City)

, Florida 33126
(Zip code)

Registered agent's acceptance:

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 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.

[Signature]
(Registered agent's signature)

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

Jose Basilio Taveras Lopez, Manager,
7320 NW 12st #113 Miami, FL 33126.

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)

[Signature]
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.

Jose Basilio Taveras Lopez.
Typed or printed name of signee

FILED
2016 MAR 14 P 4:19
CLERK OF STATE
TALLAHASSEE, FLORIDA

LEO AUGUSTO CURIEL BOBADILLA

OFFICIAL TRANSLATOR OF SANTIAGO

Phone: 809-582-5053, Mobile: 809-223-6501

E-mail: leocuriel01@hotmail.com, curiel.led@gmail.com

The undersigned, LEO AUGUSTO CURIEL BOBADILLA, Official Translator for the Circuit Court of Santiago de los Caballeros, Dominican Republic, hereby CERTIFY that the following document written in Spanish, has been translated to the English version, to my best Knowledge and belief, as follows:

Cámara de Comercio y Producción de la Provincia Espaillat, Inc.

(Commerce and Production Chamber of Espaillat Province Inc.)

Tel. 809-578-7270 Fax: 809-578-7270 Email: info@camaraespaillat.net
**Mercantile Registry Certificate
Limited Liability Company**

Registry No. 586PE

RENEWALCorporation name: **VISION AUTO IMPORT, S.R.L.**

Date of Incorporation: 05/01/2007

RNC: 1-30-39033-9

Issuance Date: 07/21/2009

Last Modification Date: 01/16/2014

Expiration Date: 07/21/2016

Company Address

Street: DUARTE ROAD KM. 3½, ESTANCIA NUEVA, MOCA, ESPAILLAT PROVINCE

P.O. Box:

Sector:

Municipality: MOCA

Telephone 1: (809) 578-6400

Telephone 2:

Fax:

Activities:

Business Activities

Sale of all brands of new and used vehicles that is by importing or buying to resell the export business loans and financing

Principal Products/Services

Sale of any kind of new and used Vehicles

Amortized System (SA)**Shareholder's Name**

Name	Address (Street, Number and Sector)	Mercantile Registry	Id/ Passport	Nationality	Civil Status
JOSE BASILIO TAVERAS LOPEZ	Duarte Road, Estancia Nueva, Moca.		054-0087143-9	Dominican Republic	Single
ALICIA CAROLINA TAVERAS LOPEZ	Duarte Road, Estancia Nueva, Moca.		054-0120436-6	Dominican Republic	Single

Board of Directors

Post	Complete Name	Address (Street, Number and Sector)	Id/ Passport	Nationality	Civil Status
Manager	JOSE BASILIO TAVERAS LOPEZ	Duarte Road, Estancia Nueva, Moca..	054-0087143-9	Dominican Republic	Single

Directors and/or Persons authorized to sign

Name	Address (Street, Number and Sector)	Id/ Passport	Nationality	Civil Status
------	--	--------------	-------------	-----------------

Commissioner(s) of account(s)

Authorized Capital RD\$	Real Estate RD\$	Assets RD\$	Duration of the Corporation
1,000,000.00			UNDEFINED

Regulator:	Resolution No.:	Duration of board of Directors	6 years
------------	-----------------	--------------------------------	---------

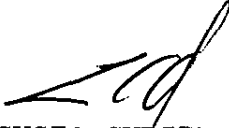
Amount Social Contribution:	Date Last Meeting/Act	02/28/2011
-----------------------------	-----------------------	------------

Commercial References				Banking References			
CAPROINSA				BANCO POPULAR DOMINICANO			
LITINSA				BANCO BHD LEON, S.A.			
Number of Employees	Male	2	Female	2	Total Employees		4
Branches and Agencies							
Trade Name	VISUION AUTO IMPORT.				Registry No.	239171	

(Signature of ANDREA PAOLA CARVAJAL, Executive Director)
 (Seal of Cámara de Comercio y Producción de la Provincia Espaillat, Inc.)

Verification Number
 A0DAFC16-E7E6-46D1-ABC3-1934E3E15D7

The above translation was made by the Official Translator of the Circuit Court of the city of Santiago de los Caballeros, Dominican Republic, on March 3rd 2016, registered on the registration book No.57 in my charge under No.1994. -----


 LEO AUGUSTO CURIEL BOBADILLA
 Official Translator

