MIWW5640

(Req	uestor's Name)	· · · · ·		
(Add	ress)			
(Add	ress)			
(City.	/State/Zip/Phone	e #)		
PICK-UP	WAIT	MAIL.		
(Bus	iness Entity Nan	ne)		
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to F	iling Officer:			
UK-31951	ADD + CI	w		

Office Use Only



800284982958

04/26/16--01006--002 **125.00

IM LA ROLLE



FLORIDA DEPARTMENT OF STATE

Division of Corporations

JUN 16 2016

 \mathbf{BY} :

June 6, 2016

ROSA M QUINTELA CPA VANTAGE POINT BUSINESS SOLUTIONS 3802 EHRLICH RD, STE. 101 TAMPA, FL 33624

SUBJECT: VAMM CORPORATE LLC

Ref. Number: W16000031951

We have received your document for VAMM CORPORATE LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Deborah Bruce Regulatory Specialist II

Letter Number: 316A00011812



April 29, 2016

ROSA M QUINTELA CPA VANTAGE POINT BUSINESS SOLUTIONS 3802 EHRLICH RD, STE. 101 TAMPA, FL 33624

SUBJECT: VAMM CORPORATE LLC Ref. Number: W16000031951

We have received your document for VAMM CORPORATE LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the complete principal office address.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Karen A Saly Regulatory Specialist II

Letter Number: 516A00009001

U



April 19, 2016

Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314

RE:

Vamm Corporate LLC.

6960 BYRON AVE., # 7 Miami Beach, FL 33141

EIN:

37-1784151

To Whom it May Concern:

Please see enclosed application for Foreign Limited Liability Company for authorization to transact business in Florida and a check in the amount of \$125.00 for the registration fee and designation of Registered Agent.

Sincerely

Rosa M Quintela, CPA

813-265-4700

COVER LETTER

A service of the service of

		NA TELLO				
SUBJI	VAMM CORPC		,			
		· Name of I	Limited Liability C	Company		
		Foreign Limited Liability Comp itted to register the above refere				
lease	return all corresponden	ce concerning this matter to the	following:			
	ROSA M. (QUINTELA CPA				
		N	ame of Person			
	VANTAGE	POINT BUSINESS SOLUTIO	ons			
	-	Firm/Company				2115
	3802 EHRI	ICH ROAD, STE 101,			7	Ĭ
			Address		100 mg (ѿ.
	TAMPA, F	L 33624			1, 1	Ū ·
		City/S	tate and Zip Code			=
	ROSA@VA	NTAGEPOINTTAMPA.COM)5	-
		E-mail address: (to be used	d for future annual	report notification)	•	
or fu	rther information conce	rning this matter, please call:				
	ROSA M. QUINTE	LA CPA	813 at (265-4700		-
	Nar	ne of Contact Person	Area Code	Daytime Tele	phone Number	
	MAILING ADDRE Division of Corporat Registration Section P.O. Box 6327 Tallahassee, FL 323	ions		STREET ADDRE Division of Corpor Registration Section Clifton Building 2661 Executive Ce Tallahassee, FL 32	rations on enter Circle	
Enclos	sed is a check for the fo		□ \$155.00 Filin Certified Copy		0.00 Filing Fee, Cert as & 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:

VAMM CORPORATE	EINESS IN THE STATE OF FLORIDAL LLC light Limited Liability Company; mu		de "Limited Liab	ility Company," "L.L.C.,	or "LLC.")		_
(If name unavailable, enter al Liability Company," "L.L.C,	ternate name adopted for the purpos	e of tra	nsacting business	in Florida. The alternate	name must in	clude "Li	 mited
· · · · · ·	•		37-1784151				
(Jurisdiction under the law	tE of which foreign limited liability	3.	37-1784151	(FEI number, if application	able)		
company is organized)			•	(* 2.	,		
4. N/A	(D F						
_	(Date first transacted busine (See sections 605 0904 & 605	.0905,	F.S. to determine	penalty liability)			
5	GYRON AVE.	#7 Princip	M, An	11 BEACH, FL	<u>. 3</u> 3141		
					5	rin	
··	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·			2016	
	(No.11)	A 41			Pro-	<u></u>	4
	(Maning	Addres	s)				language.
 Name and <u>street addres</u> 	s of Florida registered agent: (P	.O. Bo	x <u>NOT</u> accepta	ible)	Ect +-c Ect	لسا	Seatons
Name:	MARTIN EDUARDO BIGNA	SCO			***	U	PROTEST NO. 1
Office Address:	6960 BYRON AVE., # 7			•		= E	أسيعا
	MIAMI BEACH			, Florida 33141 (Zip code	7	ō-	
Registered agent's accep	(City)		·	(Zip code)		
designated in this applica- to complywith the provision	gistered agent and to accept ser tion, I hereby accept the appoin ons of all statutes relative to the my position as registered agent	prope	as registered ag	ent and agree to act i	n this capaci	ty. I fur	ther agree
	(Kcai)	ered ap	cuit sistamannet				
8. The name, title or capa MARTIN EDUARDO BI	icity and address of the person(s)) who h	as/have author	Ty to manage is/are:			
	A NOYA VILLANUEVA - MG	RM				-	
960 BYRON AVE # 7. !	MIAMI BEACH, FL 33141		1			_	
9. Attached is a certificate	of existence, no more than 10 da of which it is organized. (If he c abmitted)	ertifica W		n language, a translatio			
This document is executed submitted in a document to	in accordance with section 605.0 the Department of State constitu	0203 (utes a t	(), Florida S hird degree felo	tatutes. I am aware tha ny as provided for in s	t any false in .817.155, F.S	formatio	n
	MARTIN EDUARDO BIGNA	SCO					

Typed or printed name of signee

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "VAMM CORPORATE 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-NINTH DAY OF JUNE, A.D. 2016.

Authentication: 202578007

Date: 06-29-16