Moteralas

(Reque	estor's Name)	·
	•	
(Addre	ss)	
(Addre	ss)	
(City/S	tate/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL
(Busin	ess Entity Nar	ne)
(=	-	··- ,
(Docu	ment Number)	
(2004)		
Certified Copies	Certificates	of Status
Certified Copies	Certificates	or Glatus
Special Instructions to Fili	ng Officer:	
·		
10/110-24t	Ma	
VVIV JIL	ψ	

Office Use Only



700285107697

05/09/16--01041--019 **125.00

SECRETARY OF STALEATALLAHASSEE. FLORIDA

JUL 2 7 2016

S. YOUNG



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 10, 2016

VIJAIANTIE JADNAUTH PO BOX 960552 INWOOD, NY 11096 US

SUBJECT: VIGY ENTERPRISES LLC, SERIES

Ref. Number: W16000034076

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

A certificate of existence or accertificate 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.

Shelia H Young Regulatory Specialist II

Letter Number: 416A00009843

16 MAY -9 PH 12: 53

2016 JUL 26 PM 1:28

TALLAHASSEE .. 53

COVER LETTER

Registration Section

TO:

Divi	sion of Corporatio	ns .					
SUBJECT:	VIGY ENTERPRISES LLC, SERIES						
		Name of Limited Liability Company					
		reign Limited Liability Comped to register the above reference.					
Please return	all correspondence	concerning this matter to the	following:				
	VIJAIANTIE.	JADNAUTH					
	Name of Person						
	Firm/Company						
P. O. Box 960552							
Address						TAL!	
Inwood, NY 11096						A PARTY	
City/State and Zip Code							
	centralflcpa@gn	nail.com				PH 12: 5:	
		E-mail address: (to be use	d for future annual	report not	ification)	.: .: .: .: .: .: .: .: .: .: .: .: .: .	
For further inf	formation concerning	g this matter, please call:				53 P	
Vija	iantie Jadnauth		718 at (322-24	22		
	Name o	of Contact Person	Area Code	Day	time Telephone Number		
Divis Regi: P.O.	LING ADDRESS: sion of Corporations stration Section Box 6327 hassee, FL 32314			Division Registrat Clifton B 2661 Exe	of Corporations ion Section uilding ceutive Center Circle iee, FL 32301		
Enclosed is a check for the following amount: \$\Bigsize \$\\$\$ \$\\$125.00\$ Filing Fee \$\Bigsize \$\\$\$ Certificate of Status \$\Bigsize \$Certified Copy \$\Bigsize \$\Bigsize \$\\$\$		ng Fee &	☐ \$160.00 Filing Fee, C of Status & Certified Co				

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: VIGY ENTERPRISES LLC, Series (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.") 46-5290020 Delaware (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 1318 S Semoran Blvd, Orlando, Fl 32807 (Street Address of Principal Office) P O Box 960552, Inwood, NY 11096 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Central Florida CPA PLLC Name: 1318 S Semoran Blvd. Office Address: Orlando (City) 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 complywith 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, (Registered agent's signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Laxmi Real Estate Management LLC 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)

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.

Signature of an authorized person

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 "VIGY ENTERPRISES 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 FIFTEENTH DAY OF JUNE. A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID "VIGY ENTERPRISES LLC" IS A SERIES LIMITED LIABILITY COMPANY.

Authentication: 202495696

Date: 06-15-16

5388736 8300E

SR# 20164285634