# 110000

(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:  WW-8U458





400293570154

12/27/16--01027--024 \*\*160.00

FILED

**8** Warren DEC 3 0 2016



### FLORIDA DEPARTMENT OF STATE Division of Corporations

December 28, 2016

JEANINE ZEITVOGEL 35 SOUTH 4TH STREET WARRENTON, VA 20186

SUBJECT: RESICUM INTERNATIONAL LLC

Ref. Number: W16000086458

We have received your document for RESICUM INTERNATIONAL LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

Stacey M Warren Regulatory Specialist II

Letter Number: 416A00027600

#### **COVER LETTER**

TO:

Registration Section

Div	ision of Corporation										
SUBJECT:	Resicum Internation										
		Name of I	Limited Liability (	Company							
		reign Limited Liability Comp d to register the above refere									
Please return	all correspondence of	concerning this matter to the	following:								
	Jeanine Zeitvo	gel									
		Na	ame of Person								
	Resicum Intern	ational, LLC									
	Firm/Company										
	35 South 4th S	ı									
	Address										
	Warrenton, VA	20186									
		City/St	tate and Zip Code								
	jzeitvogel@pros	pergroupdc.com									
		E-mail address: (to be used	for future annual	report not	ification)						
For further is	nformation concernin	g this matter, please call:									
Jea	nine Zeitvogel		703 at (	984-90	51						
<del></del>	Name o	of Contact Person	Area Code	Day	time Telephone Number						
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314				of Corporations ion Section suilding ecutive Center Circle see, FL 32301							
	a check for the follow \$125.00 Filing Fee	ing amount:  \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filin Certified Copy	g 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:

(If name unavailable, enter alte Liability Company," "L.L.C,"	gn Limited Liability Company; mus ernate name adopted for the purpose or "LLC.")				,,L.O., 0	i blc.	,	
Liability Company," "L.L.C,"  2. Virginia		of trai	<del></del>	_ · · · · ·				
2. Virginia			isacting business	in Florida. The alt	ernate na	me must	includ	e "Limited
		3.	47-3389491					
company is organized)	f which foreign limited liability		- · · · · · · · · · · · · · · · · · · ·	(FEI number, if a	pplicable	e)		
4. <u>11/1/2016</u>						_		
	(Date first transacted busines (See sections 605.0904 & 605.0	ss in Fl 0905, I	orida, if prior to '.S. to determine	registration.) penalty liability)				
5. 35 South 4th St., Warren	nton,VA 20186							
	(Street Address of P	rincipa	l Office)					
6						<u>-</u> ::	( <u>)</u>	
					:	- (3) - (2) 200	514 514	-17
	(Mailing A	ddress	)			re int	C" )	Sections.
7. Name and atmost address				L1.V	,	25. 25. 25.	٩	1
	of Florida registered agent: (P.0	J. Bo	NOI accepta	ible)		<u></u>	σ	111
Name:	Robert Baird					1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5	•••	0
Office Address:	2633 Lantana Rd., Suite 807					REAL PROPERTY.	53	
	Lake Worth			, Florida 33462				
Registered agent's accepta	(City)			(Zip	code)			
lesignated in this application in the complywith the provision in the complywith the provision in the complywith the provision in the complywith the complex in the complex	istered agent and to accept servi on, I hereby accept the appoints ns of all statutes relative to the p y position as registered agent.	ment a	s registered ag	ent and agree to	act in th	his capa	icity. I	further agre
	(Registe	red age	nt s-signature)					
8. The name, title or capac	ity and address of the person(s)	who h	ıs/have authori	ty to manage is/a	re:			
Jeanine Zeitvogel, Business	• • • • • • • • • • • • • • • • • • • •							
Resicum International, LLC							_	
35 S.4th St., Warrenton VA	20186				· ·		_	
	of existence, no more than 90 days f which it is organized. (If the ceremitted)							

Typed or printed name of signee

Jeanine Zeitvogel

## Commonbrealth of Hirginia



### State Corporation Commission

### CERTIFICATE OF FACT

#### I Certify the Following from the Records of the Commission:

That Resicum International LLC is duly organized as a limited liability company under the law of the Commonwealth of Virginia;

That the date of its organization is December 9, 2014; and

That the limited liability company is in existence in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.



Signed and Sealed at Richmond on this Date: December 30, 2016

Joel H. Peck, Clerk of the Commission

CISECOM
Document Control Number: 1612305974