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(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:				
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O SIMMONS MAY 3 1 2017 May 26, 2017

Florida Department of State Division of Corporations Attn: Octavia 2661 Executive Center Circle Tallahassee, FL 32301

Re: VEIN PURCHASE SPE LLC

Dear Octavia,

Please find attached a signed copy of the APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA. Please adjust your records accordingly. We apologize for the oversight and thank you for your assistance on this matter.

Very truly yours,

Laura Farinas

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COVER LETTER

TO:	Registration Section
	Division of Corporations

VEIN PURCHASE SPE LLC

SUBJECT:

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:

LAURA FARINAS

Name of Person

VEIN PURCHASE SPE LLC

Firm/Company

9855 NW 89 TERRACE

Address

DORAL, FL 33178

City/State and Zip Code

SMORONTA@PACERCO.COM

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

For further information concerning this matter, please call:

LAURA FARINAS

_{...}305

798-6753

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 COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. VEIN PURCHAS	E SPE LLC Timited Liability Company; must include "Limited Liability Company"; must include "Liability Company"; must include	ited Liability Company""[LC" or "LC")	
FARINAS HOLDIN		on plant, company, chester, c. 1120.	
(If name unavailable, enter alternate	name adopted for the purpose of transacting business in I	Florida. The alternate name must include "Limited Liabil	lity Company," "L.L.C," or "LLC.")
_{2.} NEVADA		3. APPLIED FOR	
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	(FEI number	r, if applicable)
4. 05/12/2017		· · · · · · · · · · · · · · · · · · ·	<u> </u>
	(Date first transacted business in Florida, if prior (See sections 605.0904 & 605.0905, F.S. to deter	to registration.) mine penalty liability)	100
_{5.} 9855 NW 89 TERRACE		_{6.} 9855 NW 89 TERRAC	CE To the second
(Street Address of Principal Office) DORAL, FL 33178		DORAL, FL 33178	is)
DONAL, FL 33176		DORAL, FL 33178	
			
7. Name and street addres	ss of Florida registered agent: (P.O. Bo	x NOT acceptable)	part v byg Miller v byg Miller v byg
Name;	LAURA FARINAS		(2)
Office Address:	9855 NW 89 TERRACE		
Office Address:	DORAL		
	(City)	, Florida 33178	 .
	ons of all statutes relative to the prope s of my position as registered agent.	r una complete performance of my ur	uics, unu 1 am januau win
	(Registered agent	s signature)	
8. The name, title or capa <u>Title or Capacity:</u>	acity and address of the person(s) who h	nas/have authority to manage is/are: Title or Capacity:	Name and Address:
PRESIDENT	LAURA FARINAS		
	9855 NW 89 TERRACE		
	DORAL, FL 33178		
-			
	4	_	-
(Use attachments if neces	ssary)		
	' //	ate is in a foreign language, a translatio	on of the certificate under oath
	Signati	ure of an authorized person	
	cuted in accordance with section 605.02 to the Department of State constitutes a	:03 (1) (b), Florida Statutes. I am aware	that any false information

Typed or printed name of signee

LAURA FARINAS

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, Barbara K. Cegavske, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **VEIN PURCHASE SPE LLC**, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since January 25, 2017, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on May 15, 2017.

Ballara K. Cegarste

Barbara K. Cegavske Secretary of State

Electronic Certificate
Certificate Number: C20170515-0617
You may verify this electronic certificate
online at http://www.nvsos.gov/