

M17000007877

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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17 SEP 13 AM 9:56
DIVISION OF CORPORATIONS
STATE OF CALIFORNIA

M. MILLIGAN
SEP 18 2017

CPA TAX ACCOUNTANT, LLC
CERTIFIED PUBLIC ACCOUNTANT
8734 Lee Vista Blvd. Suite 300
Orlando, FL 32829
Tel: (407) 757-2054

JB

Fax Communication

Date: September 13, 2017

Attention: Division of Corporations

Fax number: 850-245-6030

Hour: 3:28 pm

2017 SEP 13 PM 4:32
FAX
TALLAHASSEE, FL 32310

From: Konstadinos I. Kabassis

Fax number: 407-757-2054

Page number (including cover): 2

Message: Documen Number: W17000068828

If you have problems receiving the fax, please call the telephone listed above.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 22, 2017

KONSTADINOS I KABASSIS
8 MUSEUM WAY
CAMBRIDGE, MA 02141

SUBJECT: SPOSA FASHIONS LLC
Ref. Number: W17000068828

We have received your document for SPOSA FASHIONS LLC and your check(s) totaling \$160.00. 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 III

Letter Number: 417A00017200

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SPOSA FASHIONS 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:

KONSTADINOS I KABASSIS
Name of Person

SPOSA FASHIONS LLC
Firm/Company

8 MUSEUM WAY
Address

CAMBRIDGE MA 02141
City/State and Zip Code

KOSTASK7@AOL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KONSTADINOS KABASSIS at (857) 2659322
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:

1. SPOSA FASHIONS LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," 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," "LLC," or "LLC.")

2. STATE OF DELAWARE 3. 82-1928675
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

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

5. 5953 BENT PINE DRIVE 6. SAME
(Street Address of Principal Office) (Mailing Address)
Apt 1223
ORLANDO FL 32822

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

Name: KONSTADINOS KABASSIS
Office Address: 5953 BENT PINE DRIVE
ORLANDO, Florida 32822
(City) (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.

(Registered agent's signature)

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

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
<u>SOLE MBR</u>	<u>KONSTADINOS KABASSIS</u>		
	<u>5953 BENT PINE DR</u>		
	<u>ORLANDO FL 32822</u>		

(Use attachments if necessary)

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)

10. 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)

KONSTADINOS KABASSIS

(Typed or printed name of signer)

17 SEP 13 AM 9:56
DIVISION OF CORPORATIONS
TALLAHASSEE

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "SPOSA FASHIONS 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-THIRD DAY OF AUGUST, A.D. 2017.



6439181 8300

SR# 20175839426

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 203103366

Date: 08-23-17