

MI7000009183

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

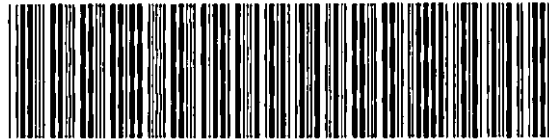
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000304598200

10/30/17--01001--008 **250.00

17 OCT 27 PM 4:50

17 OCT 27 AM 8:41
DIVISION 11

FILED

OCT 1 2017

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: DESIGNS BY VATALI 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:

JAMES DAVIS

Name of Person

1ST UNITED CRS. LLC

Firm/Company

4211 CAPITAL CIRCLE NW

Address

TALLAHASSEE, FL 32303

City/State and Zip Code

cc@unitedcrs.com

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

For further information concerning this matter, please call:

James Davis

850

322-7117

at ()

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. Designs By Vitali LLC
(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.")
2. Washington
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 47-2440088
(FEI number, if applicable)
4. Upon Registration
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 18021 171st Ave Se
(Street Address of Principal Office)
Renton, WA 98058
6. 18021 171st Ave Se
(Mailing Address)
Renton, WA 98058

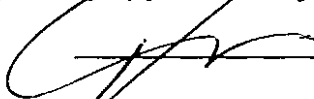
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: 1st United CRS. LLC

Office Address: 4211 Capital Circle NW
Tallahassee, Florida 32303
(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)

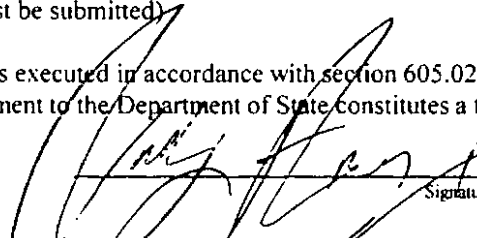
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>MGR</u>	<u>Vitaliy Arabadji</u> <u>18021 171st Ave Se</u> <u>Renton, WA 98058</u>		

Use attachments if necessary)

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 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.

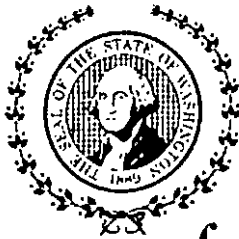

Signature of an authorized person

Vitaliy Arabadji
Typed or printed name of signer

FILED
OCT 27 AM 8:48
DIVISION OF

UNITED STATES OF AMERICA

The State of Washington



Secretary of State

I, KIM WYMAN, Secretary of State of the State of Washington and custodian of its seal,
hereby issue this

CERTIFICATE OF EXISTENCE OF DESIGNS BY VITALI LLC

I FURTHER CERTIFY that the records on file in this office show that the above named entity
was formed under the laws of the State of Washington and that its public organic record
was filed in Washington and became effective on 12/2/2014.

I FURTHER CERTIFY that the entity's duration is Perpetual,
and that as of the date of this certificate, the records of the Secretary of State
do not reflect that this entity has been dissolved.

I FURTHER CERTIFY that all fees, interest and penalties owed to this state and collected
through the Secretary of State have been paid.

I FURTHER CERTIFY that the most recent annual report has been delivered to the Secretary
of State for filing and that proceedings for administrative dissolution are not pending.

Date: October 16, 2017

UBI: 603-456-539

Given under my hand and the Seal of the State
of Washington at Olympia, the State Capital

Kim Wyman, Secretary of State

