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SECRETARY OF STATE  
ALLAHASSEE, FLORIDA

M. MILLIGAN  
APR 03 2018

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Vistronix, 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:

Juan Sese

Name of Person

Vistronix, LLC

Firm/Company

7000 Muirkirk Meadows Dr Ste 100

Address

Beltsville, MD 20705

City/State and Zip Code

juan.sese@asrefederal.com

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

For further information concerning this matter, please call:

Juan Sese

Name of Contact Person

at ( 301 )

Area Code

837-5481

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. Vistrionix, 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. Virginia  
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 54-1543041  
(FEI number, if applicable)

4. 3/27/2018  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 7000 Muirkirk Meadows Dr Ste 100  
(Street Address of Principal Office)  
Beltsville, MD 20705

6. 7000 Muirkirk Meadows Dr Ste 100  
(Mailing Address)  
Beltsville, MD 20705

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

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301  
(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.*

April Miller  
(Registered agent's signature)

April Miller, Asst. Secretary

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:**

General Manager

Gordon Foster  
7000 Muirkirk Meadows Dr  
Beltsville, MD 20705

Asst Secretary

Greg Resutck  
7000 Muirkirk Meadows Dr  
Beltsville, MD 20705

Secretary

Clifford Greenblatt  
7000 Muirkirk Meadows Dr  
Beltsville MD 20705

(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.

Juan Sese  
Signature of an authorized person

Juan Sese

Typed or printed name of signer

FILED  
2018 MAR 30 AM 9:17  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

# Commonwealth of Virginia



## State Corporation Commission

### *CERTIFICATE OF FACT*

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

That Vistronix, 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 18, 2012; 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:  
March 28, 2018*

*Joel H. Peck*

*Joel H. Peck, Clerk of the Commission*