

M19000006202

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

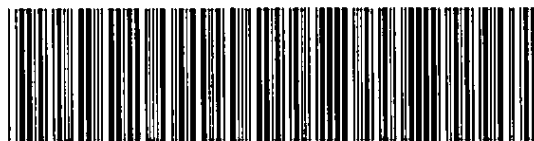
(Business Entity Name)

(Document Number)

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Office Use Only



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03/25/19--01041--001 **160.00

2019 JUN 21 PM 12:58
SECRETARY OF STATE
MAIL ABASSER 910MB

FILED

JUN 26 2019

M. SOLOMON



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 30, 2019

SEYHUN RAMAZANOV
4000 E HIBISCUS ST.
WESTON, FL 33332

SUBJECT: PATON TURBINE TECHNOLOGIES LLC
Ref. Number: W19000032350

We have received your document for PATON TURBINE TECHNOLOGIES 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) 245-6842.

Deborah Bruce
Corporate Records Supervisor II

Letter Number: 019A00006348

RECEIVED
JUN 21 2019

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: PATON TURBINE TECHNOLOGIES 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:

Seyhun Ramazanov

Name of Person

RSN Accounting LLC

Firm/Company

4000 E. Hibiscus St.

Address

Weston, FL 33332

City/State and Zip Code

seyhun.ramazanov@gmail.com

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

For further information concerning this matter, please call:

Seyhun Ramazanov

954

682-1975

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:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$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. PATON TURBINE TECHNOLOGIES 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. Ukraine

(Jurisdiction under the law of which foreign limited liability company is organized)

3.

(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. ANTONOVYCHA STR. 68

(Street Address of Principal Office)

6. 4000 E. Hibiscus St.

(Mailing Address)

Kiev, Ukraine 03150

Weston, FL 33332

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

Name:

Seyhun Ramazanov

Office Address:

4000 E. Hibiscus St.

Weston

(City)

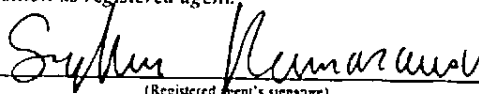
Florida

33332

(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)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2018 JUN 21 PM 12:59

FILED

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity: Name and Address:
☒ Manager Name: STASYUK VALERIY
☐ Member Address: ANTONOVYCHA STR. 68
☐ Authorized KYIV, 03150, UKRAINE
Person _____
☐ Other _____ ☐ Other _____

☐ Manager Name: Seyhun Ramazanov
☐ Member Address: 4000 E. Hibiscus St.
☒ Authorized Weston, FL 33332
Person _____
☐ Other _____ ☐ Other _____

☐ Manager Name: _____
☐ Member Address: _____
☐ Authorized _____
Person _____
☐ Other _____ ☐ Other _____

Title or Capacity: Name and Address:
☒ Manager Name: FEDOTOV DMYTRO
☐ Member Address: ANTONOVYCHA STR. 68
☐ Authorized KYIV, 03150, UKRAINE
Person _____
☐ Other _____ ☐ Other _____

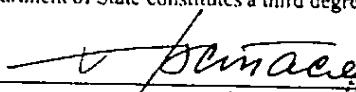
☐ Manager Name: _____
☐ Member Address: _____
☐ Authorized _____
Person _____
☐ Other _____ ☐ Other _____

☐ Manager Name: _____
☐ Member Address: _____
☐ Authorized _____
Person _____
☐ Other _____ ☐ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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
STASYUK Valeriy

Typed or printed name of officer

2019 JUN 21 PM 12:59
SECRETARY OF STATE
JAMES H. HASSER
1099 N. W. 10th St.
Tallahassee, FL 32304-3000

Переклад з української мови на англійську мову /Translation from the Ukrainian language into the English language

Annex I
to the Procedure for Issuing the Certificate of Absence of
Arrears of Payments, the Control of which is Entrusted to
the Supervisory Bodies
(Paragraph 1)

**CERTIFICATE* of Absence of Arrears of Payments, the Control of which is Entrusted to
the Supervisory Bodies**

dated May 7, 2019 No. _____

MAIN DEPARTMENT OF STATE FISCAL SERVICE IN KYIV

(name of the supervisory body**)

Payer

19355384

(EDRPOU Code / Tax Identification Number***)

LIMITED LIABILITY COMPANY PATON TURBINE TECHNOLOGIES

(name / surname, name, patronymic)

68 ANTONOVYCHA STREET, HOLOSHIVSKYI DISTRICT, KYIV CITY, 03150

(fiscal address)

as of May 7, 2019, has no tax debts, arrears on social security taxes, and debts on other payments (including installment, deferred, restructured), the control of which is entrusted to the supervisory bodies.

The Certificate is issued in accordance with

the Law of Ukraine "On Public Procurement" No. 922-VIII dated December 25, 2015

(name, number, date of approval of the regulatory act)

to be filed to

Florida Department of State, Division of Corporations

(name of the entity (enterprise, institution, organization) to which the certificate is filed)

The Certificate is valid during ten calendar days till **May 16, 2019** inclusive.

Authorized Representative — Head of State Tax Inspectorate in Holosiivskyi District of the Main Department of State Fiscal Service in Kyiv	/signed/	T. Moskalenko
	(signature)	(initials and surname)
Chief State Inspector 591-61-26	/signed/	L. Ripinska
	(signature)	(initials and surname)

* This certificate does not apply to the state registration of dissolution of a legal entity or termination of business activity of an individual entrepreneur in accordance with the Law of Ukraine "On State Registration of Legal Entities, Individual Entrepreneurs and Public Organizations".

** The supervisory body at the place of payer's registration is authorized to take measures for the repayment of the tax debt, arrears on social security taxes, and debts on other payments, the control of which is entrusted to the supervisory bodies.

*** Passport series (if any) and number (for individuals who are entitled to make payments according to passport series and number as marked in the passport).

Seal: /State Fiscal Service, Main Department of State Fiscal Service in Kyiv, Identification
Number 39439980/

K

Main Department of State Fiscal Service in Kyiv

85092/10/26-15-50-07-19 dated May 7, 2019

KV

/Barcode/

APOSTILLE
(Convention de La Haye du 5 octobre 1961)

1. Country: Ukraine

This public document

2. has been signed by **T. Moskalenko**
3. acting in the capacity of **Authorized Representative — Head of State Tax
Inspectorate**
4. bears the seal/stamp of **Main Department of State Fiscal Service in Kyiv**

Certified

5. at Kyiv
6. **May 30, 2019**
7. by **Head of Department of Consular Service of the Ministry of Foreign Affairs of
Ukraine**
8. No. **26384**
9. Seal/stamp

10. Signature **H. I. Nosok**

Seal: /Ministry of Foreign Affairs of Ukraine. Department of Consular Service. Apostille/
/signed/

/QR-code/

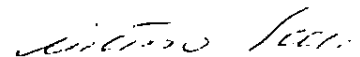
/Barcode/

0 000000 026384

Apostille fee paid: UAH 900

Переклад тексту даного документу з української мови на англійську мову виконано мною, перекладачем, Ярмоленко
Володимиром Володимировичем/ Translation of the document given above from Ukrainian into English is performed by me,
translator, Volodymyr Yarmolenko

 **В. А. Ярмоленко**



Кел N W 19000032350

Додаток 1
до Порядку надання довідки про відсутність заборгованості з
платежів контроль за справлянням яких покладено на контролюючі
органи
(Бунет 1)

ДОВІДКА*
про відсутність заборгованості з платежів, контроль за справлянням яких покладено на контролюючі органи

від 07.05.2019 року №

ГУ ДФС У М.КИЄВІ

Платник

(найменування контролюючого органу**)

(код за ЄДРПОУ / реєстраційний номер облікової картки платника податків***)

19355384

ТОВАРИСТВО З ОБМЕЖЕНОЮ ВІДПОВІДАЛЬНІСТЮ "ПАТОН ТУРБАЙН ТЕКНОЛОДЖІЗ"
(найменування / прізвище, ім'я та по батькові)

03150 М.КИЇВ, ГОЛОСІЇВСЬКИЙ Р-Н, ВУЛ. АНТОНОВИЧА, буд.68
(податкова адреса)

станом на 07.05.2019 року не має податкового боргу, недоїмки зі сплати єдиного внеску, іншої заборгованості з платежів (у тому числі розстроченої, відстроченої, реструктуризованої), контроль за справлянням яких покладено на контролюючі органи.

Довідка надається відповідно до

Закону України від 25 грудня 2015 року №922-VIII "Про публічні закупівлі"


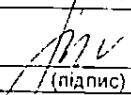
(назва нормативно-правового акту, його номер та дата прийняття)

для подання до

Держдепартамент штату Флорида, корпоративний відділ

(найменування суб'єкта (підприємства, установи, організації) до якого (якої) буде подано довідку)

Дійсна протягом десяти календарних днів включно до 16.05.2019 року.

Уповноважена особа: Начальник ДПІ у Голосіївському районі ГУ ДФС у м. Києві	 (підпис)	Т. МОСКАЛІЄНКО (ініціали та прізвище)
Головний державний інспектор 591-61-26	 (підпис)	Л. РІПІНСЬКА (ініціали та прізвище)

* Ця довідка не застосовується для проведення державної реєстрації припинення юридичної особи або припинення підприємницької діяльності фізичної особи - підприємця відповідно до Закону України «Про державну реєстрацію юридичних осіб, фізичних осіб - підприємців та громадських формувань»

** Контролюючий орган за основним місцем обліку платника уповноважений здійснювати заходи з погашення податкового боргу, недоїмки зі сплати єдиного внеску, іншої заборгованості з платежів, контроль за справлянням яких покладено на контролюючі органи

*** Серія (за наявності) та номер паспорта (для фізичних осіб, які мають відмітку в паспорті про право здійснювати платежі за серією та номером паспорта)

APOSTILLE * АПОСТИЛЬ
(Convention de La Haye du 5 octobre 1961
Гаазька Конвенція від 5 жовтня 1961 року)

1. Україна

Цей офіційний документ

2. підписаний Москаленко Т.

3. у якості Упов. особа -Начальник ДПІ

4. містить проставлену печатку / штамп

ГУ ДФС у м. Києві

ПІДТВЕРДЖЕНО

5. в м. Києві

6. дата 30.05.2019

7. ким начальник відділу ДКС МЗС України

8. За № 26384

9. Печатка / штамп

10. Підпис Носок Г.І.



000000026384

за проставлення апостиля сплачено: 900,00₴