Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INCORPORATING SERVICES FL

Account Number: I20050000052 : (850)656-7956 Phone Fax Number : (850)656-7953

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address: rk5767a@student.american.edu.maryannc@ecn.com

Foreign Limited Liability Company ATTOLLO TECHNOLOGY LLC

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Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

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B. BOSTICK

AUG 1 8 2014

EXAMINER 8/14/2014 12:55 PM

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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.

POREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1 ATTOLLO TECHNOLOGY LLC
(Name of Poreign 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. Delaware 3 47-1540966
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4
(Dute first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 2409 N. Ocean Blvd., Apt 626, Ft. Lauderdale, FL 33305
(Street Address of Principal Office)
6 2409 N. Ocean Bivd., Apt 626, Ft. Lauderdale, FL 33305
<u> </u>
(Mailing Address)
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are;
Rachel Koretsky, 2409 N. Ocean Blvd., Apt 626, Ft. Lauderdale, FL 33305
72 - G
Member Size 5
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the efficial having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)
Rochel Koretst
Signature of an authorized person (In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjuty that the facts stated herein are true, I am aware that any false information submitted in a document to the Department of State constitutes a third degree fellony as provided for in s.217.155, F.S.)
Rachel Karetsky, Member Typed or printed name of signee

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

	of the Limited Liability Co.	- ·
If unavailable	e, the alternate to be used in	the state of Florida is:
2. The name	and the Florida street addr	ess of the registered agent and office are:
	Incorporating	Services, Ltd.
		(Name)
	1540 Glenwa	y Drive
	Florida Street	Address (P.O. Box NOT ACCEPTABLE)
	Tallahassee	32301
		City/State/Zip
liability comp registered ag statutes relati	pany at the place designated vent and agree to act in this d ing to the proper and compl	and to accept service of process for the above stated limited lin this certificate, I hereby accept the appointment as capacity. I further agree to comply with the provisions of all ete performance of my duties, and I am familiar with and registered agent as provided for in Chapter 605, Florida

Filing Fee for Application
Designation of Registered Agent

Certified Copy (optional)

Certificate of Status (optional)

\$ 100.00

\$ 25.00

\$ 30.00

5.00

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Delaware

PAGE :

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "ATTOLLO TECHNOLOGY 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 FOURTEENTH DAY OF AUGUST, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ATTOLLO TECHNOLOGY LLC" WAS FORMED ON THE THIRTEENTH DAY OF AUGUST, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

2014 AUG 15 A 8:50 SECRETARY OF STATE

5585617 8300

141065692

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

Jeffrey W. Bullock, Secretary of State

DATE: 08-14-14

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August 15, 2014

FLORIDA DEPARTMENT OF STATE

Division of Corporations

INCORPORATING SERVICES FL

SUBJECT: ATTOLLO TECHNOLOGY LLC

REF: W14000050076

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).

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.

Barbara Bostick Regulatory Specialist II FAX Aud. #: H14000192051 Letter Number: 814A00017577

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