

DATE DEPOSIT

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1. This is an application for (check one):

Original certificate (new company).

Approval of transfer of existing certificate: Example, a non-certificated company purchases an existing company and desires to retain the original certificate of authority rather that apply for a new certificate.

2. Name of company: VITCOM, LLC

3. Name under which applicant will do business (fictitious name, etc.):

VITCOM, LLC

4. Official mailing address:

Street/Post Office Box: 1428 36th St, Suite 224a

City: Brooklyn

State: NY

Zip: 11218

5. Florida address:

Street/Post Office Box: 17888 67th Court North

City: Loxahatchee

State: FL

Zip: 33470

6. Structure of organization:

Individual

Foreign Corporation

General Partnership

Other, please specify:

Corporation

Foreign Partnership

Limited Partnership

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