

F19000001641

(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:

name W19-25933

M17-8338

Office Use Only



900325542499

03/04/19--01001--005 **87.50

FILED
19 MAR 29 PM 1:08
CLERK OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 16, 2019

ZACHARY TAPP
1095 BROKEN SOUND PKWY NW, #300
BOCA RATON, FL 33487

SUBJECT: GREENLANE HOLDINGS INC
Ref. Number: W19000025933

We have received your document for GREENLANE HOLDINGS INC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

The document number of the name conflict is M17000008338.

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.

Octavia L Simmons
Regulatory Specialist III

Letter Number: 119A00005291

20190316 11:03 AM

Greenlane Holdings, LLC.

Greenlane Holdings, LLC
1095 Broken Sound Pkwy NW #300
Boca Raton, FL 33487

March 25, 2019

Florida Department of State
Division of Corporations
P.O Box 6327
Tallahassee, FL 32314


RE: Letter Number 119A00005291

Florida Department of State,

I have received your document with regards to the name conflict of entity M17000008338, we are the same principals. We kindly ask the State to please allow us to adopt the name GREENLANE HOLDINGS, INC.

Also please find attached an updated Application with the name of our new Chief Financial Officer, Ethan Rudin.

Best,



Aaron LoCascio
CEO

COVER LETTER

TO: Registration Section
Division of Corporations
GREENLANE HOLDINGS INC

SUBJECT: _____
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:
ZACHARY TAPP

Name of Person
WAREHOUSE GOODS LLC

Firm/Company
1095 BROKEN SOUND PKWY NW #300

Address
BOCA RATON FLORIDA 33487

City/State and Zip code
TAXDEPT@GNLN.COM

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

For further information concerning this matter, please call:

ALAN BERGMAN 561 8625229

Name of Person Area Code Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☒ \$87.50 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. Greenlane Holdings, INC

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. DE

(State or country under the law of which it is incorporated)

3. 83-0806637

(FEI number, if applicable)

4. 05/02/2018

(Date of incorporation)

5. _____

(Date of duration, if other than perpetual)

6. _____

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1095 Broken Sound pkwy NW #300 Boca Raton FL 33487

(Principal office address)

(Current mailing address, if different)

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

Name: Warehouse Goods LLC

Office Address: 1095 Broken Sound pkwy NW #300

Boca Raton, Florida 33487

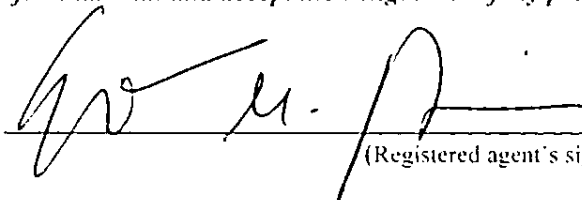
(City)

(Zip code)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

9. Registered agent's acceptance:

I, having been named as registered agent and to accept service of process for the above stated corporation 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)

Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction of the law of which it is incorporated.

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Aaron Locascio

Address: 1095 Broken Sound pkwy NW #300

Boca Raton, FL 33487

Director: Adam Schoenfeld

Address: 1095 Broken Sound pkwy NW #300

Boca Raton, FL 33487

B. OFFICERS

President: Aaron Locascio

Address: 1095 Broken Sound pkwy NW #300

Boca Raton, FL 33487

Vice President: Adam Schoenfeld

Address: 1095 Broken Sound pkwy NW #300

Boca Raton, FL 33487

Secretary: Aaron Locascio

Address: 1095 Broken Sound pkwy NW #300 Boca Raton FL 33487

Treasurer: Ethan M Rudin

Address: 1095 Broken Sound pkwy NW #300 Boca Raton FL 33487

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12.  _____

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that 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.

3. Ethan Rudin Treasurer

(Typed or printed name and capacity of person signing application)

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19 MAR 29 PM 1:08
TALLAHASSEE, FLORIDA

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "GREENLANE HOLDINGS, INC." IS DULY
INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD
STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS
OF THIS OFFICE SHOW, AS OF THE THIRTEENTH DAY OF FEBRUARY, A.D.
2019.



6807907 8300

SR# 20190978643

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

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

Authentication: 202256007

Date: 02-13-19