| (Re | questor's Name) | |
|-------------------------|-------------------|-------------|
| (Ad | dress) | |
| (Ad | dress) | |
| (Cit | y/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nar | me) |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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| | | |
| | | |

Office Use Only



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August 12, 2019

GAIL MARTIN ABERCROMBIE 401 E JACKSON STRET, STE 2225 TAMPA, FL 33602

SUBJECT: VET BUYERS CLUB, INC.

Ref. Number: W19000074367

We have received your document for VET BUYERS CLUB, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

The name and title of the person signing the document must be noted beneath or opposite the signature.

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.

Brooke N Kinsey Regulatory Specialist II

www.sunbiz.org

Letter Number: 219A00016586

COVER LETTER

| TO: Registration Section Division of Corporation | | | |
|--|---|--|---|
| Vet Buyers | | | |
| SUBJECT: | Name of corporatio | n - must include suffix | *************************************** |
| Dear Sir or Madam: | | | |
| "Certificate of Existence," | | Authorization to Transact Business in nding" and check are submitted to regisess in Florida. | |
| | ndence concerning this matte | r to the following: | |
| Gtel Martin Abercrombie | | | ********* |
| 8° | Name of | Person | |
| Sivyer, Barlow & Watson, F | 'A. | | |
| 401 E. Jackson St., Suite 22 | | | |
| | Addr | ess | ************** |
| Tamps, Fl. 33602 | | | |
| City/State and Zip code | | | |
| gabererombie@shwlegal.co | | ter future annual report notification) | 9 |
| | it-mail aduress; (to be used | for future annual report nonflication) | 11 300/6100 |
| For further information co | succerning this matter, please | call: | |
| Gail Martin Aberctombie | \$13 at (| 223-4242 | PH 4: |
| Name of Person | | ie Daytime Telephone Number | <u>.</u> |
| STREET/COUR Registration Section of Corporation of | enter Circle | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | |
| Enclosed is a check for th | e following amount: | | |
| 第 \$7 0.00 Filing Fee | S78.75 Filing Fee & Certificate of Status | ☐ \$78.75 Filing Fee & ☐ \$87.50 F Centified Copy Certified Centified | ite of Status & |

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

| | E WITH SECTION 607, 1503, FLORIDA STA REIGN CORPORATION TO TRANSACT BU. D. Inc. | | | -4/ 14/ |
|-----------------------------------|---|---|---------------|--|
| (Enter name of c | orporation; must include "INCORPORATED." " orp," "Inc," "Co," or "Corp.") | COMPANY," "CORPORATION | | |
| (If name anavaila | ible in Florida, enter alternate corporate name ado | opted for the purpose of massactin | e business in | Florida) |
| Delaware | | | | • |
| (State or counts April 2, 2019 | y under the law of which it is incorporated) | (FEI number, if ap | plicable) | ······································ |
| | 5 | | | |
| (Date | of incorporation) | (Date of duration, if other | than perpetua | ıl) |
| | | | | |
| · · | ivy., Camden. DE 19934 (Proteinal) | office address) | | |
| 5012 Avenue Av | ignon, Luiz, FU 33558 | ornec addressy | | |
| | (Correct continue | udress, if different) | ••••• | |
| | (Co. On maring o | adoress, ir differenty | | |
| . Name and stree | <u>t address</u> of Florida registered agent: (P.O. I | Box NOT acceptable) | | |
| | Sivyer, Barlow & Watson, P.A. | , | | 201 |
| Name: | | | - | 2019 ALIG |
|)ffice Address: | 401 E. Jackson St., Suite 2225 | | | 2 |
| mee i ida o.s. | Tampa | 33602 | , | <u>-</u> |
| | *************************************** | | | |
| | (City) | (Zip code) | | 主 |
| Danietarad an | ent's acceptance: | | -17 | |
| | ed as registered agent and to accept service | of process for the above state | | C∏ n d itth e |
| | application, I hereby accept the appointmen | | | |
| irther agree to c | omply with the provisions of all statutes rela | tive to the proper and comple | te performa | |
| uties, and I am f | amiliar with and accept the obligations of n | sy position as registered agent | : | |
| | 21207WM-11-1.023 | - Are | | |
| | No. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | Net 14 - Till 1 | | |

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

A. DIRECTORS

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

| Chairmar | | | ************************ | |
|----------------------------------|---|---|---|---------------|
| Address: | | ****** | | |
| | | | *************************************** | |
| Vice Cha | iteran. | *************************************** | | |
| Address: | | | ••••••••••••••••••••••••••••••••••••••• | |
| | | | *************************************** | |
| Directors | | ···· | | |
| Addreas. | | *************************************** | | ***** |
| | | | | |
| Director. | | | | ************* |
| Addresst | | | ····· | |
| B. OFF President | Stephen Watter: | , | 2019 | |
| Address | 5012 Avenue Avignon, Listz, Et. 33553 | ·*. | 3 | 17 |
| | | ······································ | F | .2.23 |
| Vice Pres | ident | | <u> </u> | |
| Address. | | , | <u>ن</u> ئ | الكورية |
| | | | | **** |
| Secretary | | ************** | · | |
| Address | | | | |
| Treasurer | | ************ | ************* | •••• |
| Addressi | | *************************************** | | |
| NOTE: | If necessary, you may attach an addendum to the application listing additional officers a | md'or dir | ectors. | |
| 12. | for Walt | • | | ····· |
| are true . a third de Step | Signature of Director or Officer ter or director signing this document (and who is listed in number 11 above) affirms that and that he or she is aware that false information submitted in a document to the Departregree felony as provided for in s.\$17.155, F.S. hen Watters. President | Bert of Si | late const | |
| | (Typed or printed name and capacity of person signing application) | | | |



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "VET BUYERS CLUB, 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 TWENTY-THIRD DAY OF JULY, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "VET BUYERS CLUB, INC." WAS INCORPORATED ON THE SECOND DAY OF APRIL, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES HAVE BEEN ASSESSED TO DATE.

19 AUG II. AH 7:24 SECRETARY OF AN O



7355422 8300 SR# 20196108306 Authentication: 203268351

Date: 07-23-19