F23000006863

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Busiliess Ethity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
L			





500419223405

11/21/23--01032--014 **78.75

2023 NOV 21 PH 4: 30

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: VIVO360, Inc.			
Name of	corporation	- must include suffix	
Dear Sir or Madam:			
	f Good Stand	Authorization to Transact Business in Florida," ling" and check are submitted to register the s in Florida.	
Please return all correspondence concerning	g this matter	to the following:	
Sophie Gibson			
	Name of I	Person	
VIVO360, Inc.			
	Firm/Comp	pany	
1954 Airport Road, Suite 130-11			
	Addre	58	
Chamblee, Georgia 30341			
· · · · · · · · · · · · · · · · · · ·	City/State an	d Zip code	
sophie.gibson@vivo360inc.com			
E-mail address: (to be used fo	or future annual report notification)	
For further information concerning this mat	ter, please ca	11:	
Sophie Gibson	404	784 4688	
Name of Person	Area Code	Daytime Telephone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a check for the following amout Please make check payable to: FLORIDA DEF \$78.75 Filing Certificate of	ARTMENT Fee & 🗀	OF STATE \$78.75 Filing Fee & Certified Copy Certified Copy 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.

VIVO360, Inc.			
	orporation; must include "INCORPORATED," " orp," "Inc." "Co," or "Corp,")	COMPANY," "CORPORATIO:	Κ."
(If name unavails	able in Florida, enter alternate corporate name add	opted for the purpose of transacting	ng business in Florida)
Georgia	3 43	3-2011127	
(State or countr 05/23/2002	y under the law of which it is incorporated) 5.	(FEI number, if ap	
·	of incorporation)	(Date of duration, if other	than perpetual)
11/20/2023			
	(Date first transacted business in FI (SEE SECTIONS 607.1501 & 607.1502		ity)
	d, Suite 130-11. Chamblee, GA 30341		
	(Principal office	street address)	
1954 Airport Roa	id, Suite 130-11, Chamblee, GA 30341		
. Name and <u>stree</u> Name:	et address of Florida registered agent: (P.O. E Opal Gibson	Box <u>NOT</u> acceptable)	202
office Address:	1560 Sawgrass Corporate Parkway, 4FL	_	17 1 - 18 AON 6201
	Sunrise	, Florida	42 ₁
	(City)	(Zip code)	(c) (c) (c) (d)
laving been nam	ent's acceptance: ed as registered agent and to accept service (d corporation at the place
urther agree to c	application, I hereby accept the appointmen omply with the provisions of all statutes rela with and accept the obligations of my positi	tive to the proper and complet	
	spallet		
	(Registered agent's signa	iture)	

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.

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS						
■ Chairman	Name: Sophie Gibson 1954 Airport Pontster30-11	□ Chairman	Name: Egan Gibson-Thompson			
□Vice Chairman		□Vice Chairman	Address: Chamble Co. A 3034 1			
□Director	<u> </u>	□Director	<u> </u>			
□President		□President				
□Vice President		□Vice President				
□Secretary	□Treasurer	≅ Secretary	□Treasurer			
□Other		□Other				
□Chairman □Vice Chairman	Name: Nage Gibson-Thompson Name: T954 Air port Rd, Sk136-11 Address: Chamble C. 6x30341	□Chairman □Vice Chairman	Name:			
■Director		□Director				
□President		□President				
□Vice President		□Vice President				
□Secretary	□Treasurer	□ Secretary	Treasurer			
□Other	Other	□Other	Other			
□Chairman	Name:Address:	□ Chairman	Name:			
□ Director	Address.	□ Director	Address:			
□President		☐President				
□Vice President		□Vice President				
□ Secretary	□Treasurer	☐ Secretary	☐Treasurer			
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 where thing your Florida Department of State Annual Report form. 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 8.817.155, F.S.						
Sophie Gibson Chair Reson and Founder & C. S. O (Typed or printed name and capacity of person signing application)						



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached are the forms and instructions to register a foreign profit corporation to transact business in Florida. The requirements are as follows:

- Pursuant to section 607.1503(1), Florida Statutes, the attached application must be completed in its entirety.
- The corporation must submit an original certificate of existence, no more than 90 days old, duly authenticated by the Secretary of State or the proper official having custody of corporate records in the state or country under the law of which it is incorporated. 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.
- There is a \$70.00 registration fee and a letter of acknowledgment will be issued free of charge upon registration.
- Certification fees are <u>optional</u>. Please submit an additional \$8.75 if a certificate of status is needed. The fee for a certified copy of the application is \$8.75 (plus \$1 per page for each page over 8, not to exceed a maximum of \$52.50). Please check the appropriate box on the COVER letter and send one check for the total amount made payable to the Florida Department of State.
- The COVER letter included in this packet should be completed and submitted along with the certificate, application and check. Both the mailing address and courier address are noted in the COVER letter.
- Important Information About the Requirement to File an Annual Report
 All Profit Corporations must file an Annual Report yearly to maintain "active"
 status. The first report is due in the year following formation. The report must be filed
 electronically online between January 1st and May 1st. The fee for the annual report is
 \$150. After May 1st a \$400 late fee is added to the annual report filing fee. "Annual
 Report Reminder Notices" are sent to the e-mail address you provide us when you submit
 this document for filing. To file any time after January 1st, go to our website at
 www.sunbiz.org. There is no provision to waive the late fee. Be sure to file before May 1st.

Any further inquiries concerning this matter should be directed to the Registration Section by calling (850) 245-6051 or writing the Registration Section, Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314.

CR2E007 (1/19)

Control Number: 0229771

STATE OF GEORGIA

Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I. **Brad Raffensperger**, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

VIVO360, INC. a Domestic Profit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 26191901 Date Inc/Auth/Filed: 05/23/2002 Jurisdiction : Georgia Print Date : 11/20/2023 Form Number : 211



Brad Raffangerger

Brad Raffensperger Secretary of State