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Account Number : 120010000112

Phone : (302)575-0875

Fax Number

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Foreign Limited Liability Company VEGALAB LLC

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G. McLEOD

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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| 1 VEGALAB LLC | |
|---|------------|
| (Name of Foreign 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 and attach a copy of the writter consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.") | t |
| 2 Delaware | |
| (Jurisdiction under the law of which foreign limited liability (FE) number, if applicable) company is organized) | |
| 4. 05/24/2012 _{5.} Perpetual | |
| (Date of Organization) (Duration; Year limited liability company will cease to exist or "perpetual") | |
| 6 | |
| (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) | |
| 7 7755 Ironhorse Blvd | W)-1 |
| We have Delete December 51, 20110 | · · |
| | |
| | Ç Man g |
| (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here | ۹,, |
| 9. The name and usual business addresses of the managing members or managers are as follows: | |
| David Selakovic - 7755 Ironhorse Blvd West Palm Beach, FL 33412 | |
| | |
| | |
| | |
| 10 second in an adole of matters of subsection and the subsection of the second back of the language seconds of months | |
| 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a |) MF3 |
| translation of the certificate under cath of the translator must be submitted.) | |
| 11. Nature of business or purposes to be conducted or promoted in Florida: | |
| natural fertilizers and pesticides | |
| D Slave | |
| Signature of a member or an authorized representative of a member. | |
| (In secondance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the | |
| penalties of perjury 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 felony as provided for in s.817.155, F.S.) | |
| David Selakovic | |
| Typed or printed name of signee | |

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

| If unavailable, the alternate to be used in the state of Florida is: | | | | |
|--|--------------------------|---|--|--|
| 2. The name and | the Florida street addre | ess of the registered agent and office are: | | |
| | Agents and C | orporations, Inc. | | |
| • | | (Name) | | |
| • | 300 Fifth Ave. | . South, Suite 101-330 | | |
| • | Plorida Street | Address (P.O. Box NOT ACCEPTABLE) | | |
| | Naples | _{FL} 34102 | | |
| | ITOPIOO | | | |

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

Agents and Corporations, Inc.

By: / Signature)

John L. Williams - President

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

Delaware

DAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "VEGALAB 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 THIRTY-FIRST DAY OF JANUARY, A.D. 2013.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "VEGALAB LLC"
WAS FORMED ON THE TWENTY-FOURTH DAY OF MAY, A.D. 2012.

5159451 8300

130112192

DATE: 01-31-13

You may verify this certificate online at corp. delaware, gov/authver, whim!