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2014 FEB IL PH 2: 55

FEB 17 2014 D. BRUCE

1112-12350



November 5, 2013

WADE WILSON 1060 HOLLAND DR, SUITE F BOCA RATON, FL 33487

SUBJECT: BIOVAPOR SOLUTIONS LLC

Ref. Number: W13000061350

We have received your document for BIOVAPOR SOLUTIONS LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain the name, title, and business address of each managing member or manager who will manage the foreign limited liability company in the state of Florida. Please insert "MGRM" in the title portion for each managing member and "MGR" in the title portion for each manager.

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.

Deborah Bruce Regulatory Specialist II

Letter Number: 313A00025699

2014 FEB 14 PM 2: 55

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT: Biovapor Solutions LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida...

Please return all correspondence of	concerning this matter to the	ne following:					
Wade V	Vilson						
	1	Name of Person					
Biovapo	or Solutions	LLC					
	F	irm/Company					
1060 H	olland Drive	Suite F					
		Address					
Boca R	aton FL 334	87					
	City/s	State and Zip Code					
jason@	biovaporsoli	utions.co	m	•			,
	E-mail address: (to be use	d for future annual	report noti	ification)	Z.,	20	
For further information concerning	g this matter, please call:					2014 F	ca- -
Wade Wilso	on	_{at (} 561	, 288	38559	新克克 第588	FEB 14	Care me
Name o	of Person Are	ea Code & Daytime	Telephon	e Number	m'c.	P	
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	Divisi Regist Cliftor 2661 I	ET ADDRESS: on of Corporations ration Section Building Executive Center C assee, FL 32301			FLORIDA	M 2: 55	Garages,
Enclosed is a check for the for the formula \$125.00 Filing Fee	ollowing amount: \$\B\$\$ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Fili Certified Co		□ \$160.00 Filir of Status & 6	_		

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:

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN T	"HE STATE OF FLORIDA:
1. Biovapor Solutions LLC	
(Name of Foreign Limited Liability Company; must inc	clude "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purp consent of the managers or managing members adopting the alt Company," "L.L.C," "LLC.")	pose of transacting business in Florida and attach a copy of the writte ternate name. The alternate name must include "Limited Liability
₂ Delaware	3 27-2123617
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4. 01/27/2010	_{5.} n/a
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6	
(Date first transacted business in F (See sections 608.501 & 608.502 F.	florida, if prior to registration.) S. to determine penalty liability)
7. 113 Barksdale Professional Ctr	
Newark DE 19711-3258	
(Street Addres	ss of Principal Office)
8. If limited liability company is a manager-manage	ed company, check here
9. The name and usual business addresses of the ma	
Jason Barrett	
1060 Holland Dr Suite F	55 S
Boca Raton FL 33487	
10. Attached is an original certificate of existence, no more than 9 the jurisdiction under the law of which it is organized. (A photoc translation of the certificate under oath of the translator must be su	
11. Nature of business or purposes to be conducted of	or promoted in Florida:
Development and Research	
~3(2)
Signature of a member or an a	authorized representative of a member.
	ecution of this document constitutes an affirmation under the true. I am aware that any false information submitted in a
	es a third degree felony as provided for in s.817.155, F.S.)

Jason Barrett

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	he state of Florida is:			
2. The name a	and the Florida street address	s of the registered agent and office are:			
	Wade Wilson				
		(Name)	•		
	1060 Holland [Or Suite F			
	Florida Street A	ddress (P.O. Box NOT ACCEPTABLE)		2014	
	Boca Raton	_{FL} 33487		FE8 14	===
		City/State/Zip	<u> </u>	29) 94.70
liability comporegistered agestatutes relativ	any at the place designated ir nt and agree to act in this ca ng to the proper and complete	d to accept service of process for the above s n this certificate, I hereby accept the appoint pacity. I further agree to comply with the pr e performance of my duties, and I am familia gistered agent as provided for in Chapter 608	stated limi ment as ovisions o or with and	ர் of all d	

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

(Signature)

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "BIOVAPOR SOLUTIONS 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 TWENTY-NINTH DAY OF OCTOBER, A.D. 2013.

2014 FEB I L PH 2: 56

4781738 8300

131244837

Jeffrey W. Bullock, Secretary of State

AUTHENTICATION: 0851926

DATE: 10-29-13

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