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SECRETARY OF STATE

JUN - 5 2014

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Provectus 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 Florid
Please return all correspondence concerning this matter to the following:
Lauren Fox, COO
Name of Person
Provectus LLC
Firm/Company
80 SW 8th Street, 1870
Address
Miami, FL 33130
City/State and Zip Code
lauren.fox@provect.us
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Lauren Fox _{at (} 786) 360-0100
Name of Contact Person Area Code Daytime Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount: \$\Boxed{1}\$\$ \$125.00 \text{ Filing Fee}\$ \$\Boxed{1}\$\$ \$\$130.00 \text{ Filing Fee} & \$\Boxed{1}\$\$ \$\$155.00 \text{ Filing Fee} & \$\Boxed{1}\$\$ \$\$\$ \$\$\$ \$\$160.00 \text{ Filing Fee}, \text{ Certificate of Status}\$\$\$\$ \$\$\$\$ \$\$\$\$ \$\$\$\$ \$\$\$\$ \$\$\$\$ \$\$\$\$\$ \$\$\$\$



May 21, 2014

LAUREN FOX, COO PROVECTUS LLC 80 SW 8TH STREET 1870 MIAMI, FL 33130

SUBJECT: PROVECTUS OF FLORIDA LLC

Ref. Number: W14000032077

We have received your document for PROVECTUS OF FLORIDA 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):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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.

Letter Number: 614A00011014

Teresa Brown Regulatory Specialist II

www.sunbiz.org

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Provectus LLC	100		
(Name of Poreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "I Provectus of Florida, LLC	LC.")		
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name Liability Company," "L.L.C." or "LLC.")	must includ	e "Limit	ied
_{2.} Wyoming _{3.} 46-5357271			
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable company is organized)	;)		
_{4.} May 1, 2014			
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	- IAI		
_{5.} 20801 Biscayne Blvd., Suite 403			·
Miami, FL 33180	iASS ASS	72 -1-	1.5
(Street Address of Principal Office)	EG	P	T
6. 80 SW 8th St., Suite 1870	FLOX	ب	
Miami, FL 33130	AIE PRIDA	07	
(Mailing Address)			
7. The name, title or capacity and address of the person(s) who has/have authority to man	age is/are	;	
Josh Eikov, CEO			
Lauren Fox, COO			
Mark Lucky, CFO			
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated in a foreign language, a translation of the certificate under of the submitted) Signature of an authorized person (In accordance with section 605.8203, P.S., the execution of this document constitutes an affirmation under the penalties of perjury that an aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for	tocopy is ath of the	not transla	ator
Lauren A. Fox			
Typed or printed name of signee			

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

. The name of the Limited Liability Company is:		
Provectus LLC		
If unavailable, the alternate to be used in the state of Florida is:		
Provectus of Florida, LLC		

2. The name and the Florida street address of the registered agent and office are:

Victor	ia Rudman
	. (Name)
20801	Biscayne Blvd., Suite 403
-	Plorida Street Address (P.O. Box NOT ACCEPTABLE)
Miami	_{FL} 33180
	City/State/Zip

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 605, Florida Statutes.

(Signature)

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

STATE OF WYOMING Office of the Secretary of State

I, MAX MAXFIELD, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

PROVECTUS LLC

is a Limited Liability Company

formed or qualified under the laws of Wyoming did on **April 8, 2014**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2014-000662490**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 12th day of May, 2014 at 12:18 PM. This certificate is assigned 015586120.



Maj Massielo
Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website http://wyobiz.wy.gov and following the instructions displayed under Validate Certificate.