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Certified Copies	_ Certificates	of Status
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#### **COVER LETTER**

TO: Registration Section
Division of Corporations

SUBJECT: Logistix Innovations 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 concerning this matter to the following:

Lance Burstyn			
Name of Person		_	
Logistix Innovations LLC			
Firm/Company		-	
444 Brickell Ave Suite 51 - 445		2014	4
Address		35	T.
Miami, FL 33131			Property leaves
City/State and Zip Code		סי	777
logistixinnovations@gmail.com		.: ⊒	and the same
E-mail address: (to be used for future annual report notification)	34		

For further information concerning this matter, please call:

Lance Burstyn

...305

834-0044

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:

□ \$125.00 Filing Fee

■ \$130.00 Filing Fee & Certificate of Status

□ \$155.00 Filing Fee & Certified Copy

□ \$160.00 Filing Fee, Certificate of Status & Certified Copy

### 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:

If name unavailable, enter alterr	mate name adopted for the purp	ose of transacting business in I	Torida. The alternate name must incl	lude "Limite
iability Company," "L.L.C," or		47 46500	100	
Dover Delawar	IFE  f which foreign limited liability	3. <u>47-16583</u>	(FEI number, if applicable)	
company is organized)	, william tartigu milliam tartigu		(1 Di nomber, a apprendict)	
<sub>4.</sub> <u>08-05-2014</u>	Date first transacted bus	siness in Florida, if prior to regi	ctention )	
444544	(See sections 605.0904 & 60	05.0905, F.S. to determine pen	alty liability)	
<sub>5.</sub> 444 Brickell A	ve Suite 51 - 44	45		
Miami, FL 331	131			
		Address of Principal Office)		22
<sub>6.</sub> 444 Brickell Av	ve Suite 51 - 44	15	All tour his to a second of the second of th	₹ ∽— <b>™</b>
Miami, FL 331	131			A
		(Mailing Address)		
7. The name, title or ca	apacity and address of th	ne person(s) who has/ha	ive authority to manage is/a	Fe:
Title Manager			<b>87 :</b>	
				9
Global Vapor Ho	oldings LLC			
12864 Biscayne	e Blvd. #438, No	orth Miami Bead	ch FL 33181	
		***************************************		
_			s old, duly authenticated by is organized. (A photocopy	
	_		e certificate under oath of the	
must be submitted)				
	$\sim$	BA		
	Cionatur	re of an authorized pers	on.	

Lance Burstyn

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.

Logistix Innovations LLC					
If unavailable, the alternate to be used in the state of	f Florida is:				

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

#### Corporate Creations Network Inc.

(Name)

#### 11380 Prosperity Farms Road #221E

Florida Street Address (P.O. Box NOT ACCEPTABLE)

Pairn Beach Gardens FL 33410
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.

Tim Pratts, Special Secretary

œ

(Signature)

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

# Delaware

PAGE 1

#### The First State

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

DELAWARE, DO HEREBY CERTIFY "LOGISTIX INNOVATIONS 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 ELEVENTH DAY OF SEPTEMBER, A.D. 2014

5577865 8300

141165740

DATE: 09-11-14

AUTHENTY CATION: 1688001

Jeffrey W. Bullock, Secretary of State

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