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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: VICTOX CONSULTING 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:
Manda Castellon Name of Person
Douglas Registered Agents, LLC Firm/Company
2600 S. Douglas Rd, Ste SIO
Coral Gables FL 33134 Otty/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Arranda Castellon at (786) 391-3721 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: Status 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 POLLOWING IS SUBMITTED TO REFOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF PLORIDA:	GISTER A	
1. VICTOX COSULTION LICENSTRUCTURE TENDED Limited Liability Company; "L.L.C.," or "L.C.," or "L.C.,	* (****)	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Liability Company," "L.L.C," or "L.L.C,")	Liquied	
2. Detaware the law of which fureign limited liability (FIII number, if applicable) company is organized)	پ میکمر د	
4. N/A (Pate first transported business in Florids, (Furior to registration.) (See acciouns 605.0904 & 605.0905, F.S. to determine penalty liability)	magin tae e/	
5. 6515 COILING AVE #1801	**** *** *	
Miami Beach, FL 33141 (Street Address of Principal Office)		
6 2600 S. Dagias Rd, SK 510		
Ceral Gables, FL 33134	_ ~~	
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/arc:		
Alexandre Targe Tavares ou Santos - Harr	<u>per</u>	
6515 COLLING AVE #1801	new worth.	
Miami Beach, FL 33191		
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the chaving custody of records in the jurisdiction under the law of which it is organized. (A photocopy is acceptable, If the certificate is in a foreign language, a translation of the certificate under oath of the tra	o t	
must be submitted)	15 M	ş
Signature of an authorized person > = (in accordance with section 605,0203, P.B., the execution of this document conditutes as affirmation under the penalties of perjury that the facts triped in	SO escinglatora	laran. Maran
are aware that may falm influentation submitted in a discussion to the Department of State constitutes a third degree fedory as provided for in \$.817.333, F.	SI TO	: ===
Alexandre Frye Tauries dos Santos	2: 2	·.

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.

1. The name of the Limited Liability Company is:	
Victrix Consulting, LLC	
If unavailable, the alternate to be used in the state of Florida is:	
2. The name and the Florida street address of the registered agent and office are:	
Dagias Registered Agents, LLC	
Plorida Street Address (P.O. Box NOT ACCEPTABLE)	
Coral Corbles FL 33134 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. ASE SECTION SIGnature)	erman product
\$ 100.00 Filing Fee for Application	-

\$ \25.00\text{Designation of Registered Agent} **Certified Copy (optional)** Certificate of Status (optional)

5.00

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "VICTRIX CONSULTING 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 EIGHTEENTH DAY OF FEBRUARY, A.D. 2015.

15 MAR - W PH 2: 25

5656737 8300

150209851

Jeffrey W. Bullock, Secretary of State
AUTHENTY CATION: 2126750

DATE: 02-18-15

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