Page 1 of 1

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM

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LΩ

Foreign Limited Liability Company VLP, LLC d/b/a PEPI COFFEE COMPANY, LLC

Certificate of Status	0
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Page Count	05
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Corporate Filing Menu

JUL 3 0 2015 Help

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COVER LETTER

	distration Section Islan of Corporations				
SUBJECT:	VLP, LLC				
	Name of Limited Liability Company				
	l "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of id 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:				
	Janossa Palmer				
	Name of Person				
	VLP, LLC				
	Fiлп/Company				
	165 Technology Dr Address				
	Dothan, AL - 36303 City/State and Zip Code				
VANUSSO P @ Depi-foods. Com E-hadi address: (to be used for future simual report positication)					
For further i	nformation concerning this matter, please call:				
A	Name of Contact Person at (334) UNI - 14415 Area Code Daytime Telephone Number				
Div Reg P.C	ision of Corporations pistration Section Box 6327 Clifton Building Lahassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				
	s a check for the following amount: 125.00 Filing Fee				

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:

1. VLP, LLC (Name of Foreign Limited Liability Company	y; must include "Limited I	Jability Company,"	"L.1C.," or "LLC.")	
PEPI COFFEE COMPANY, LLC			•	
(If name unavailable, enter afternate name adopted for the Liability Company," "L.L.C," or "LLC.")	purpose of transacting bus	iness in Florida. The	alternate name must includ	ie "Limited
2. Alabama	3	20,38	NDA932	
(Jurisdiction under the law of which foreign limited liabs company is organized)	Illity	(FEI numb	or, if applicable)	······································
upon qualification				
(Date first transacted	business in Florida, if pri & 605.0905, F.S. to deteri) Sign	<u> </u>
5 165 Technology Dr. Dothan, AL - 36303			Ţ	ੋਂ ਯੀ
			ير خرار مو مود ما مود ما مود	
(Si	reet Address of Principal (Office)		
5 165 Technology Dr. Dothan, AL - 36303			ři-	<
V			771	
	(Mailing Address)	·		
	ger 145 Tech Technology	ndogy on	_	X3113 X03
8. Attached is an original certificate of existe having custody of records in the jurisdiction acceptable. If the certificate is in a foreign lamust be submitted)	under the law of wi	hich it is organi	zed. (A photocopy is	s not
Ų	Parmer			
Sign: (In accordance with section 605.0203, P.S., the execution of this or aware that any false information submitted in a document to the section of the se	ature of an authorize document constitutes on affin the Department of State consti	nation under the nenal	ties of perjury that the facts sta ony as provided for in \$317.13	ited herein are true 1 55, F.S.)
\a	nessa Palme	uc		
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.

1. The name	of the Limited Liability	Company is:	
VLP, LLC			
If unavailable	e, the alternate to be use	d in the state of Florida is:	
Pepi C	offee Company	LIC	
2. The name	and the Florida street ac	ddress of the registered agent and office are:	
	C T Corporation System	ı	**************************************
		(Name)	15. ((()
	1200 South Pine Island Road		
	Florida Street Address (P.O. Box NOT ACCEPTABLE)		29 SS:
	Plantation	FL 33324	
		City/State/Zip	T: 11 Fiaif Oridi

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.

By: CT Corporation System Representation System By:

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

John H. Merrill Secretary of State

P.O. Box 5616 Montgomery, AL 36103-5616

STATE OF ALABAMA

I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that VLP, LLC was formed in Houston County, Alabama on July 22, 2010. The Alabama Entity Identification number for this entity is 449-853. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.

15 JUL 29 AM 7: 11
SECRETARY OF STATE
SECRETARY OF STATE



20150728000014360

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

7/28/2015

Date

X. W. Merill

John H. Merrill

Secretary of State