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APR 06 2017
S. YOUNG



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 24, 2017

ROBERT SHREFFLER
GENETIC POTENTIAL, INC
4710 ELISENHOWER BLVD STE A-6
TAMPA, FL 33634

SUBJECT: VERTIMAX, LLC
Ref. Number: W17000025450

We have received your document for VERTIMAX, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), Authorized Person (AP), or Authorized Representative (AR).

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.

Shelia H Young
Regulatory Specialist II

Letter Number: 917A00005697

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Vertimax, 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:

Robert Shreffler

Name of Person

Genetic Potential, Inc.

Firm/Company

4710 Eisenhower Blvd, Suite A-6

Address

Tampa, FL 33634

City/State and Zip Code

RShreffler@Vertimax.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robert Shreffler	813	512-3454
_____ Name of Contact Person	at (_____) 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:

<input type="checkbox"/> \$125.00 Filing Fee	<input type="checkbox"/> \$130.00 Filing Fee & Certificate of Status	<input checked="" type="checkbox"/> \$155.00 Filing Fee & Certified Copy	<input type="checkbox"/> \$160.00 Filing Fee, Certificate of Status & Certified Copy
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**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. Vertimax, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Commonwealth of Virginia 3. 58-2125822
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 4710 Eisenhower Blvd., Suite A-6
Tampa, FL 33634
(Street Address of Principal Office)

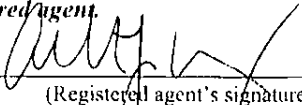
6. 4710 Eisenhower Blvd., Suite A-6
Tampa, FL 33634
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Albert Marez
Office Address: 4710 Eisenhower Blvd., Suite A-6
Tampa, Florida 33634
(City) (Zip code)

Registered agent's acceptance:

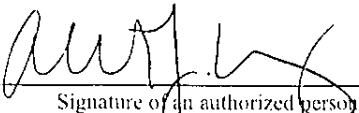
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Albert Marez, CHIEF OPERATING OFFICER, MGR
4710 Eisenhower Blvd., Suite A-6
Tampa, FL 33634

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)


Signature of an authorized person

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Albert Marez
Typed or printed name of signee

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Commonwealth of Virginia



State Corporation Commission

CERTIFICATE OF FACT

I Certify the Following from the Records of the Commission:

That Vertimax, LLC is duly organized as a limited liability company under the law of the Commonwealth of Virginia;

That the date of its organization is March 16, 2017; and

That the limited liability company is in existence in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.

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Signed and Sealed at Richmond on this Date:

March 16, 2017



Joel H. Peck

Joel H. Peck, Clerk of the Commission