

Division of Corporations

Page 1 of 2

M1800003169

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H180001052253)))



H180001052253ABCV

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : HARVARD BUSINESS SERVICES,
Account Number : 120090000045
Phone : (302) 645-7400
Fax Number : (302) 645-1290

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

18 APR -3 AM 8:38

FILED

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: michelle@vcbbbrands.com

Foreign Limited Liability Company
VCB Licensing 2, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

2018 APR -3 PM 4:24

RECEIVED

Electronic Filing Menu

Corporate Filing Menu

Help

(((H18000105225 3)))

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS
IN FLORIDAIN 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. VCB Licensing 2, 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. Delaware

(Jurisdiction under the law of which foreign limited liability company is organized)

3. -

(FED number, if applicable)

4. -

(Date first transacted business in Florida, if prior to registration.
(See sections 605.0901 & 605.0903, F.S., to determine priority liability.)

5. 195 S Westmonte Drive, Suite 1108

(Street Address of Principal Office)

Altamonte Springs, FL 32714

6. 195 S Westmonte Drive, Suite 1108

(Mailing Address)

Altamonte Springs, FL 32714

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

Name:

Matthew Craig

Office Address:

195 S Westmonte Drive, Suite 1108

Altamonte Springs,

(City)

Florida 32714

(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:

Title or Capacity:

Name and Address:

Title or Capacity:

Name and Address:

MBR

VCB Partners, LLC

195 S Westmonte Dr Ste 1108
Altamonte Springs, FL 32714

MBR

Matthew Craig

195 S Westmonte Dr Ste 1108
Altamonte Springs, FL 32714

(Use attachments if necessary)

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)10. 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.

Signature of an authorized person

Matthew Craig

Typed or printed name of signer

(((H18000105225 3)))

(((H18000105225 3)))

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "VCB LICENSING 2, 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 THIRD DAY OF APRIL, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "VCB LICENSING 2, LLC" WAS FORMED ON THE TWENTY-EIGHTH DAY OF MARCH, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.



6819624 8300

SR# 20182392036

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

A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 202441331

Date: 04-03-18

(((H18000105225 3)))