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COVER LETTER

TO:

Registration Section Division of Corporations

		Name of	Limited Liability	Company		
					ansact Business in Florida," (y company to transact busine	
e return a	all correspondence	concerning this matter to the	: following:			
	Sonia Brister					
		N	lame of Person			
	VividGro, LL0	3				
		F	irm/Company	<u>.</u>		
	801 N. Atlanti	c Avenue				
			Address			
	Cocoa Beach.	FL 32931				
		City/S	State and Zip Code			
	sbrister@lsgc.co					
		E-mail address: (to be use	d for future annua	report no	tification)	
irther inf	ormation concernit	ng this matter, please call:				
Sonia	a Brister		321 at (779-55	40	
	Name	of Contact Person	Area Code	Day	time Telephone Number	
Divis Regis P.O. I	LING ADDRESS ion of Corporation stration Section Box 6327 hassee, FL 32314			Division Registrat Clifton B 2661 Exc	CADDRESS: of Corporations ion Section suilding ecutive Center Circle see, FL 32301	
	check for the follow 25.00 Filing Fee	ving amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filid Certified Copy	ng Fee &	■ \$160.00 Filing Fee. Cer of Status & Certified Copy	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

finame unavailable, enter alternate n	ame adopted for the purpose of transacting business in Flor	ida. The alterna	ite name must include "Limited Lia	ibility Company," "L.L.C," or "LLC.")
Delaware		3. 83	11665127	
(Jurisdiction under the law of wh	nich foreign limited hability company is organized)		(FEI non	ber, if applicable)
08/17/2018				
	(Date first transacted business in Florida, if prior to r (See sections 605 0904 & 605,0905, F.S. to determine	egistration) re penalty liabil	ity)	
801 N. Atlantic Avenu	c	6 80	I N. Atlantic Avenue	
			(Mailing Add	lress)
Cocoa Beach, FL 3293	1	Co	coa Beach, FL 32931	
			· · · · · · · · · · · · · · · · · · ·	
Name and street addres	s of Florida registered agent: (P.O. Box	NOT acce	eptable)	
Name:	Capitol Corporate Services, Inc.			SEP 21 PH 2
Office Address:	515 East Park Ave Fl 2			2
Office Address.				
	Tallahassee (City)		, Florida <u>32301</u>	
			(Zip cod	F)
aving been named as re signated in this applicate comply with the provision	tance: eistered agent and to accept service of p ion, I hereby accept the appointment as ons of all statutes relative to the proper of ny position as registered agent.	registered and compl	l agent and agree to act ete performance of my	l liability company of the plain this capacity. I further o
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Page 1

<u>Delaware</u>

The First State

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

DELAWARE, DO HEREBY CERTIFY "VIVIDGRO, 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 SEVENTH DAY OF SEPTEMBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "VIVIDGRO, LLC"

WAS FORMED ON THE SEVENTEENTH DAY OF AUGUST, A.D. 2018.

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

at com delaware gov/au

Authentication: 203380820

Date: 09-07-18

6963255 8300 SR# 20186523964

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