# M18000009026

1
(Requestor's Name)
(Address)
,
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
1
(During Cale Name)
(Business Entity Name)
(Document Number)
1
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
[
i
1 1/1 (27 397
cert W18-82397

Office Use Only

l



100318245671

09/11/18--01004--024 \*\*130.00

FILED
18 007 -1 PH 4: 20

OCT 11. 7018



## FLORIDA DEPARTMENT OF STATE Division of Corporations

September 14, 2018

STEVEN MALOVIC 4755 TARREGA STREET SEBRING, FL 33872

SUBJECT: BIOTICBOUNTY LLC Ref. Number: W18000082397

2018 OCT - 1 AM 10: 1, 7

We have received your document for BIOTICBOUNTY LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons Regulatory Specialist III

Letter Number: 218A00019143

9/28/2018

PLEASE SEE ATTACHED LETTER OF GOOD STANDING

THANK YOU

Stores Marone

www.sunbiz.org

#### **COVER LETTER**

	egistration Section ivision of Corporation	s !				
SUBJECT	BioticBounty LLC					
30 DA 130 1		Name of I	Limited Liability C	ompany		
					nsact Business in Florida," Certificate company to transact business in Florida	
Please retu	rn all correspondence c	oncerning this matter to the	following:			
	Steven Malovi	C i				
	Name of Person					
			rm/Company			
	4755 Tarrega	Street	 	<del></del>		
	Sebring, FL, 3	3872	Address			
		City/S	ate and Zip Code			
	steve@bountyg	reens.com	 			
		E-mail address: (to be used	for future annual	report not	ification)	
For further	information concerning	g this matter, please call:	1			
S	teven Malovic		561	400-97	04	
	Name o	f Contact Person	Area Code	Day	time Telephone Number	
D R P	MAILING ADDRESS: vivision of Corporations egistration Section O. Box 6327 allahassee, FL 32314			Division of Registrati Clifton Br 2661 Exe	CADDRESS: of Corporations on Section uilding cutive Center Circle ce, FL 32301	
	s a check for the follow I \$125.00 Filing Fee	ing amount:  \$\B\$\$ \$130.00 \text{ Filing Fee & Certificate of Status}	\$155.00 Filin Certified Copy	g Fee &	□ \$160.00 Filing Fee, 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 FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

I. BioticBounty LLC		 "Cimited Liability Company," "L.L.C.," or "LLC	7.19			
		diffined Liability Company, L.L.C., or L.C.	··· )			
DIOTICSPLASH LL		ss in Florida. The alternate name must include "Limited	Liability Company," "L.L.C." or "LLC.")			
<sub>2</sub> Delaware		3. 83-1824184				
<u></u>	hich foreign limited liability company is organized	) (FEI r	(Fill number, if applicable)			
4	(Date first transacted business in Florida, if	prior to registration.)				
4755 T 01	(See sections 605.0904 & 605.0905, F.S. to					
5. 4755 Tarrega Street		6. 4755 Tarrega Street	Address)			
fourth I manage to		(	<b>3 3</b>			
Sebring, FL, 33872		Sebring, FL, 33872				
7. Name and street addre	ss of Florida registered agent: (P.C	). Box NOT acceptable)	- m			
		,	11 - O			
Name:	Steven Malovic					
Office Address:	4755 Tarrega Street		主持 景			
	Sebring	33872	26 A			
	(City)		code)			
	ss of my position as registered ages	(agent's signature)	·			
	inchine.co	, agent a ngamare,				
	•	who has/have authority to manage is/are				
Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:			
Dir	Angela Schadl	Dir	Steven Malovic			
	4755 Tarrega St Sebring, FL, کنگ کا	2_	4755 Tarrega St Sebring, FL、スパクノ2			
	Journal Control		<del>00011119  1 2) 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 </del>			
<del></del>	_	<u> </u>				
(Use attachments if neces	seary)					
	-					
	of which it is organized. (If the cer	s old, duly authenticated by the official rtificate is in a foreign language, a trans				
10. This document is avai	autod in accordance with section 60	5.0203 (1) (b), Florida Statutes. I am a	ware that any false information			
		es a third degree felony as provided for				
	= 1 - Ind					
	7	Signature of an authorized person				
	- \ <u>.</u>					
	STEVEN MAI	ovic_				
		Typed or printed name of signee				

Page 1

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "BIOTICBOUNTY 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 TWENTY-SEVENTH DAY OF SEPTEMBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BIOTICBOUNTY LLC" WAS FORMED ON THE SIXTH DAY OF SEPTEMBER, A.D. 2018.

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

Authentication: 203507500

Date: 09-27-18

7046341 8300 SR# 20186874718