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COVER LETTER

TO:

CUD IP	Vertical Response Group.	. LLC				
OBJE	UBJECT: Name of Limited Liability Company					
The enc Existenc	losed "Application by Foreign I ee, and check are submitted to re	Limited Liability Con egister the above refe	npany for Authoriza renced foreign limi	ation to Transact Business in Florida," Ce ted liability company to transact business	rtificate of in Florida.	
Please r	eturn all correspondence concer	ming this matter to the	e following:			
	Kristyn Dow					
		Name of Person				
	Sparrow Administrat	Sparrow Administrative Services LLC				
		Firm/Company				
	11515 66th St	11515 66th St				
	Address					
	Largo, FL 33773	Largo, FL 33773				
		City/	State and Zip Code			
	kdow@sparrowadmin.		-			
		nail address: (to be use	ed for future annual	report notification)		
ror turti	ner information concerning this	matter, please call:				
	Kristyn Dow		727 at (451-4942)		
	Name of Con	tact Person	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 foll Please make check payable to:		TMENT OF STA	TE		
	S125.00 Filing Fee	\$130.00 Filing Fee Certificate of St		Filing Fee & S160.00 Filing Fee, of Status & Certific		

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 FOREKIN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Vertical Response Group, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") Vertical Response Group Florida, 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 "LL.C.") Delaware 26-4437979 (Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905; F.S. to determine penalty liability) 1013 Centre Rd Ste 403S 11515 66th St 5. (Street Address of Principal Office) (Mailing Address) Wilmington, DE 19805 Largo, FL 33773 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Registered Agents Inc Name: 7901 4th St Ste 300 Office Address: St Petersburg . Florida 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.

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]: Title or Capacity: Name and Address: Title or Capacity: Name and Address: David Lukrich ☐Manager Name: Manager Manager Name: ______ Address: _ 450 Clipper Hill Rd Member Member Address: _____ Danville, CA 94526 Authorized Authorized Person Person Other_ Other____ Other_ Other_ Manager Name: ______ Manager Name: Member Address: Member Address: Authorized Authorized Person Person Other Other ___ Other Other Manager Manager | Name: _____ Member Member Address: __ ■Authorized Authorized Person Person Other_____ Other_ Other Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed individuals may be added to the index when filing your Florida Department of State Annual Report form. 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 David Lukrich

Typed or printed name of signee



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

DELAWARE, DO HEREBY CERTIFY THAT "VERTICAL RESPONSE GROUP, LLC" IS

DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR

REVOKED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY

AUTHORIZED TO TRANSACT BUSINESS.

THE FOLLOWING DOCUMENTS HAVE BEEN FILED:

CERTIFICATE OF FORMATION, FILED THE TWELFTH DAY OF MARCH, A.D. 2009, AT 12:36 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID

CERTIFICATE IS THE ONLY PAPER OF RECORD, THE LIMITED LIABILITY

COMPANY IN QUESTION NOT HAVING FILED AN AMENDMENT NOR HAVING

MADE ANY CHANGE WHATSOEVER IN THE ORIGINAL CERTIFICATE AS FILED.

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

Authentication: 202001659

Date: 01-02-19

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