P.001/004

Florida Department of State

Division of Corporations
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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : URS AGENTS LLC Account Number : I20150000127

Account Number : 120150000117

Phone : (800)567-4397

Fax Number : (800)567-4398

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

Email Address: alina.jais@vaultbank.io

Foreign Limited Liability Company TOKENVAULT LLC

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COVER LETTER

TO:	Registration Section Division of Corporation	กร			
\$UBJ:	TOKENVAULT LI				·
		Name of	Limited Liability (Company	
					insact Business in Florida," Cartificate of y company to transact business in Plorida
Please	return all correspondence	concerning this matter to the	following:		
	ALINA JAIS				
		N	ame of Person		
	TOKENVAUI	LT LLC			
		F	irm/Company		
	2394 Broadwa	y Street			
			Address		
	San Francisco,	CA 94115			
		City/S	State and Zip Code		
	alina.jais@vault	bank.io			
		E-mail address: (to be use	d for future annua	report no	lification)
For fu	rther information concernit	ng this matter, please call:			
	Kathy Clark		800 a. (567-43	97
	Name	of Contact Person	Area Code	Day	time Telephone Number
	MAILING ADDRESS Division of Corporation Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division Registrat Clifton B 2661 Exe	ADDRESS: of Corporations ion Section uliding courier Center Circle ice, FL 32301
Enclo	sed is a check for the follow S125.00 Filing Pee	ving amount: \$\int \text{\$\sum \text{\$\exitex{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\texit{\$\}\$\text{\$\text{\$\tex{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$	☐ \$155.00 Filir Certified Copy	ng Fee &	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

(((H19000010555 3)))

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 POREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Delaware			must include "Limited Lieb	mit contents for		UC,")
		3. N/A				_
(Jurisdiction under the law of wh	ich farcign limke é liabilby compony is arganized)		(РЕІ пытін	r. (l'appliesble)		_
		- Interestina V		<u> </u>		,
	(Date first transacted but liets in Florida, if prior to pt. (See sections 603,0904 & 603,0905, F.S. to determine	a pensity kabihiy)				
(Street Address of F	Grand M. Brand	6	(MaiEng Addn			_
2394 Broadway Street	Inches Overs		(1) (1) (1) (1) (1) (1) (1) (1)	,	-7 .	
San Francisco, CA 941	15				(1)	19
San Flancisco, CX 941	13				 	
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Name and street address	s of Florida registered agent: (P.O. Box	NOT_acceptab	le)		ر. در در در	0
Name:	URS AGENTS, LLC			9	٠,٠,٠	0
ranio.				•	· · · · · ·	>
Office Address:	3458 LAKESHORE DRIVE			•	777	
	TALLAHASSEE		Piorida 32312	:	gr if d	AH 11: 3
	(City)		(Zip oods)	75 A	ယ္
signated in this applicated in the comply with the provision.	gistered agent and to accept service of pi tion, I hereby accept the appointment as ions of all statutes relative to the proper to s of my position as registered agent.	registered age and complete p	nt and agree to act verformance of my t	in this capacity interest, and I are	y, I fur nı fanıll	ther agr
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Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "TOKENVAULT 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 TWELFTH DAY OF DECEMBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TOKENVAULT LLC" WAS FORMED ON THE SEVENTH DAY OF JUNE, A.D. 2018.

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

at corn delaware soy/aut

Authentication: 204083767

Date: 12-12-18

6926119 8300 SR# 20188111498