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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CAPITOL SERVICES, INC.

Account Number : I20160000017 Phone : (855)498-5500 Fax Number : (800)432-3622

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

Email Address:

Foreign Limited Liability Company **VERTIGO, LLC**

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Certificate of Status	0
Certified Copy	0
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H21000449501

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:

1. Vertigo, LLC (Name of Foreign	Limited Liability Company; must include "Limited Liab	ility Company," "[LL.C.," or "11.C.")	
iVertigo, LLC			
-	ame adopted for the purpose of transacting business in Florida. Th	e alternate name must include "Limited Liability Co	ompany," "L.L.C." or "LL.C.")
2. Delaware		3. (PRI number, if a)	Carbina
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	(PPS number, that	pplicable)
1			
··	(Date first transacted business in Florida, if prior to registra (See sections 605.0904 & 605.0905, P.S. to determine pena	tion.) uty liability)	_
5 275 Breezy Loop		_{6.} 275 Breezy Loop	
(Street Address of		(Mailing Address)	
Oakland, TN 380	60	Oakland, TN 38060	
			
		 	As &
 Name and street address 	ss of Florida registered agent: (P.O. Box NO	Tacceptable)	2021 DEC 10 \$1.575 (155) (
			E.
Name:	Capitol Corporate Services, Inc.		70
	E15 Cost Dark Avenue 2nd El		
Office Address:	515 East Park Avenue 2nd Fl		AHIZ: 42
	Tallahassee	, Florida 32301	
	(Cuy)	(Zip code)	- ' ω
Registered agent's accep			
Having been named as re	gistered agent and to accept service of proce tion, I hereby accept the appointment as reg	ss for the above stated limited liab intered agent and agree to act in th	ility company at the place is canacity. I further avre
to comply with the provis	ions of all statutes relative to the proper and s of my position as registered agent.		
and and open service were desired	Toylor Sung	Taylor Seay, as Asst. S	ecretary on behalf
	(w/v 1	of Capitol Corporate	Services, Inc.

(Registered agent's signature)

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manage [up to six (6) total]:					
Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:		
⊠Manager	Name: Luke Yeransian		Name: Luke Yeransian		
Member	Address: 275 Breezy Loop	Member	Address: 275 Breezy Loop		
Authorized	Oakland, TN 38060	Authorized	Oakland, TN 38060		
Person		Person			

8. For initial indexing purposes, list names, title or enpacity and addresses of the primary members/managers or persons authorized to

Person		Person	
Other	Other	Other	Other
Manager	Name: Odyssey 2012 LLC	Manager ✓ Manager	Name: Siddhartha 2012 LLC
Member	Address: 17330 W Center Road, Suite 110-345	☐ Member	Address: 17330 W Center Road, Suite 110-345
Authorized	Omaha, NE 68130	Authorized	Omaha, NE 68130
Person		Person	
Other	Other	Other	Other
Manager	Name:	Manager	Name:
Member	Address:	Mcmbcr	Address:
Authorized		Authorized	
Person		Person	

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

Other____

Other____

- 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

Mark Kriscunas, Senior Counsel

Typed or printed name of signee

Other_

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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 "VERTIGO, 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 NINTH DAY OF DECEMBER, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "VERTIGO, LLC" WAS FORMED ON THE NINETEENTH DAY OF AUGUST, A.D. 2014.

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

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

Authentication: 204922077

Date: 12-09-21