# M2300011283

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> 1023 AUG 28 PM 2: 03 SECRETARY OF STATE

W23-101227



July 24, 2023

CRISTINA NAZARIO 4210 VALLEY RIDGE BLVD, SUITE 102 PONTE VEDRA BEACH, FL 32081 US

SUBJECT: VAULTES, LLC Ref. Number: W23000101227

The notary public's acknowledgement is incomplete. The seal, signature, and expiration date must be affixed. A notary public cannot notarize his own signature.

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

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

Letter Number: 923A00016557

Ariel Jones Regulatory Specialist II

www.sunbiz.org

### **COVER LETTER**

TO:		ation Section n of Corporations			
SUBJE		ultes, LLC			
		Namo	of Limited Liability	Сотралу	
				ration to Transact Business in Florida," Certificate of ited liability company to transact business in Florida	
Please i	return all	correspondence concerning this matter to	o the following:		
		Cristina Nazario			
			Name of Person		
		Vaultes, LLC			
	Firm/Company				
		4210 Valley Ridge Blvd, Suite 102			
		Address			
		Ponte Vedra Beach, FL 32081  City/State and Zip Code			
		cristina.mack@vaultes.com			
	E-mail address: (to be used for future annual report notification)				
For furt	ther infor	mation concerning this matter, please cal	l:		
	Cristina Nazario		386 at (	748-0812	
	-	Name of Contact Person	Area Code	Daytime Telephone Number	
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327		Street Address:		
			Registration Section		
			Division of C		
			The Centre of		
	Tallah	assee, FL 32314	2415 N. Mon Tallahassee, I	roe Street, Suite 810 FL 32303	
	Please r	d is a check for the following amount: nake check payable to: FLORIDA DEP .00 Filing Fee  \$130.00 Filing Fee Certificate o	& 🔲 \$155.00 Fi		

## 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: Vaultes, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") tting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.") Commonwealth of Virginia (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) e first transacted business in Florida, if prior to registration.)
sections 605,0904 & 605,0905, F.S. to determine penalty liability) 12110 Sunset Hills Road, Suite 600 12110 Sunset Hills Road, Suite 600 (Street Address of Principal Office) (Mailing Address) Reston, VA 20190 Reston, VA 20190 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Cristina Nazario Name: 4210 Valley Ridge Blvd, Suite 102 Office Address: Ponte Vedra Beach 32081

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.

Florida

(Registered agent's signature)

(Crty)

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:
■Manager	Name:	□Manager	Name: Cristina Nazario
□Member	Address: 276 Gardiners Bay Drive	□Member	Address: 276 Gardinders Bay Drive
<b>■</b> Authorized	Ponte Vedra, FL 32081	Authorized	Ponte Vedra, FL 32081
Person		Person	
□Other	Other	□Other	
□Manager	Name: Jennifer Hughes	□Manager	Name:
□Member	Address: 4210 Valley Ridge Blvd, Suite	□Member	Address:
■ Authorized	Ponte Vedra Beach, FL 32081	□Authorized	
Person		Person	
□ Other	Other	Other	□Other
□Manager	Name:	□Manager	Name:
□ Member	Address:	□Member	Address:
]Authorized		□Authorized	
Person		Person	
Other	Other	□Other	· · · · · · · · · · · · · · · · · · ·

- 9 jι
- 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 Jose David Nazario, Manager

Typed or printed name of signee

# Common brealth of Hirginia



### State Corporation Commission

#### CERTIFICATE OF FACT

1 Certify the Following from the Records of the Commission:

That VAULTES, LLC is duly organized as a Limited Liability Company under the law of the Commonwealth of Virginia;

That the Limited Liability Company was formed on April 28, 2016; and

That the Limited Liability Company is in existence in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.

ORATION COMMISSION 1903

Signed and Sealed at Richmond on this Date:

July 17, 2023

Bernard J. Logan, Clerk of the Commission

CERTIFICATE NUMBER: 2023071719000213