ø



Secretary of State

LLC-5

Application to Register a Foreign Limited

Liability Company (LLC)

For Office Use Only -FILED-

File No.: 202464810623 Date Filed: 12/2/2024

Must be submitted with a current Certificate of Good Standing issued by the government agency where the LLC was formed.

Filina Fee - \$70.00

Certified Copy Fee (Optional) - \$5.00

Note: Registered LLCs in California may have to pay minimum \$800 tax to the California Franchise Tax Board each year. For more information, go to

| https://www.nb.ca.gov/. | | This Space For Office Use Only | | | |
|---|------------------------------|---------------------------------------|--------------|--------------|--|
| 1a. LLC Name (Enter the exact name of the LLC as listed on your attached | d Certificate of Good Standi | ing.) | | | |
| Vintage Eclectic Roots, LLC | | | | | |
| 1b. California Alternate Name, If Required (Only enter an alterna | te name if the LLC name in | 1a not available in Californ | ia.) | | |
| | | | | | |
| 2. LLC Jurisdiction (Ensure that the jurisdiction matches the attached | Certificate of Good Standing | g.) | | | |
| a. Jurisdiction (State, foreign country or place where this LLC is formed.) | | | | | |
| Delav | vare | | | | |
| b. Authority Statement (Do not alter Authority Statement) | | | | | |
| This LLC currently has powers and privileges to conduct busine | ess in the state, foreig | n country or place ent | ered in Ito | em 2a. | |
| 3. Business Addresses (Enter the complete business addresses, Ite | ms 3a and 3b cannot be a F | P.O. Box or "in care of" an i | ndividual or | entity.) | |
| a. Street Address of Principal Office - Do not enter a P.O. Box | City (no abbreviations) | State | Zip Co | Zip Code | |
| 1310 Prospect Drive, Suite 10-346 | Jackson | CA | 9564 | 95642 | |
| b. Street Address of Principal Office in California, If any - Do not enter a P.O. Sox | City (no abbreviations) | State | a Zip Çor | de | |
| | • | CA | . | | |
| c. If the Mailing Address is the same as item 3a or 3b, check the applicable box; | ✓3a | · - . | | , | |
| d. Mailing Address - if different than item 3a or 3b | City (no abbreviations) | | Zip Coo | Zip Code | |
| 4. Service of Process (Must provide either Individual OR Corporation. | • | | | <u></u> | |
| INDIVIDUAL - Complete Items 4a and 4b only. Must include agent's full in | | · · · · · · · · · · · · · · · · · · · | | T 0. 46. | |
| a. California Agent's First Name (if agent is not a corporation) Samantha | Middle Name Last Name Roots | | | Suffix | |
| | | | | <u> </u> | |
| b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box | | | | Zip Code | |
| 1310 Prospect Drive, Suite 10-346 | Jackson CA | | 9564 | 14 | |
| CORPORATION - Complete Item 4c only. Only include the name of the r | registered agent Corporation | n, | | | |
| c. California Registered Corporate Agent's Name (if agent is a corporation) - Do not | t complete Item 4a or 4b | | | | |

5. Read and Sign Below (Title not required.)

By signing, I affirm under penalty of perjury that the information herein is true and correct and that I am authorized to sign

on behalf of the foreign LLC.

Samantha Roots MANA ONTO

<u>Delaware</u>

The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "VINTAGE ECLECTIC ROOTS, 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 SECOND DAY OF DECEMBER, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "VINTAGE ECLECTIC

ROOTS, LLC" WAS FORMED ON THE TWENTY-FIFTH DAY OF NOVEMBER, A.D.

2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN

ASSESSED TO DATE.

e at corn delaware gov/auti

Authentication: 205006718

Date: 12-02-24