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Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	

Office Use Only



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SECRETARY DE STATE





FLORIDA DEPARTMENT OF STATE Division of Corporations

May 3, 2018

ALLEN JOHNSON 212 E HALFORD ST MILFORD, PA 18337

SUBJECT: ADVANCED DATA CORP.

Ref. Number: W18000041337

We have received your document for ADVANCED DATA CORP. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Letter Number: 718A00009092

Justin M Shivers
Regulatory Specialist II Supervisor
Registration/Qualification Section

COVER LETTER

	stration Section of Corpo		_			-
SUBJECT:	Adı	Vanced Name	Doct of corporati	a Co on - must in	2000 al	110 n
Dear Sir or M	1adam:					
"Certificate of	of Existence,		e of Good St	tanding" and	d check are sul	act Business in Florida," bmitted to register the
Please return	all correspon	ndence concerr	ning this mat	ter to the fo	llowing:	
Allen	Jol	nnson				
			Name o	of Person		
Adva	need `	Data (COPP	· ,		
_		,	Firm/Co	ompany		
212	EAST	T HA	CFORI	2 57		
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Milf	ocd,	PA 1	\$337 City/State	and Zip co	<u></u>	
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<u>ajoh</u>	മടമമ	E-mail addres	s: (to be use	d for future	annual report	notification)
For further in	formation co	oncerning this i	natter, pleas	e call:		
Stook	<u> </u>	Johnson	at (91-	7, 8	61-89	2.0
Nam	e of Person	<u> </u>	Area Co		Daytime Telep	
Regis Divis Clifto 2661	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clifton Building P.O. Box 6327 Clifton Building P.O. Box 6327 Tallahassee, FL 32314			Section orporations 7		
	hassee, FL 3					
Enclosed is a	check for the	e following am	ount:			
□ \$70.00 Fil	ing Fee	\$78.75 Filir Certificate		S78.75 Certifie	Filing Fee & d Copy	S87.50 Filing Fee, Certificate of Status &

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.
1. Advanced Data Corp. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp." "Inc," "Co," or "Corp.")
Advanced Data FL. Lorp. (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. PA 3. 46-3805243
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 1 1 2014 5. Unknown
(Date of incorporation) (Date of duration, if other than perpetual)
6. <u>N/A</u>
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
(Principal office address)
P.O. Box 1443 Milford PA 18337 SEE TO Current mailing address, if different)
(Current mailing address, if different)
(Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: CHAD HUDGINS
Office Address: 1415 8th AUE
Lehigh Acres, Florida 33972
(City) (Zip code)
9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation 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.

(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: N/A Address: Vice Chairman: V/A Address: Director: N/A Director: N/A **B. OFFICERS** M. Iford, Vice President: Secretary: N/A Treasurer: N/A Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Alber B Jahnson Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that 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. Johnson

(Typed or printed name and capacity of person signing application)

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE

05/16/2018

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

Advanced Data Corp.

is duly registered as a Pennsylvania Business Corporation under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written

Acting Secretary of the Commonwealth

Certification Number: TSC180516100578-1

Verify this certificate online at http://www.corporations.pa.gov/orders/verify