

# F18000004336

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(Requestor's Name)

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(Address)

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(Address)

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(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

\_\_\_\_\_  
(Business Entity Name)

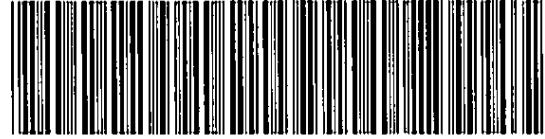
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(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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**FILED**  
2018 SEP 19 PM 3:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N CULLIGAN

SEP 20 2018



21 Robert Pitt Drive Suite 310 • Monsey, NY 10952 • 845.356.8390 • Fax 845.356.8397

August 2, 2018

**Registration Section**  
**Division of Corporation**  
2661 Executive Center Circle  
Tallahassee, FL 32301

Re: **SmithVance, Inc**

To Whom It May Concern:

Enclosed please find the completed Application by Foreign Corporation For Authorization to Transact Business in Florida request for SmithVance, Inc.

Once the application has been approved, please forward evidence of the approval to:

SmithVance, Inc.  
Attn: Timothy R Smith  
50 Biscayne Blvd, Suite 2610  
Miami, FL 33132

If there is any issue with the application, or if you require any further information, kindly contact us at the number or address listed below.

Respectfully,

*Ninnette M Aquino*  
Corporate Compliance  
**Business Licenses, LLC**  
21 Robert Pitt Drive, Suite 310  
Monsey, NY 10952  
T: 845.356.8390 Ext. 216  
F: 845.356.8397  
E: [aquinon@businesslicenses.com](mailto:aquinon@businesslicenses.com)

SMITHVANCE  
2018 AUG 30 PM 2:07

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** SmithVance, Inc

\_\_\_\_\_  
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Timothy R Smith

\_\_\_\_\_  
Name of Person

Smith Vance, Inc.

\_\_\_\_\_  
Firm/Company

50 Biscayne Boulevard, Unit 2610

\_\_\_\_\_  
Address

Miami, FL 33132

\_\_\_\_\_  
City/State and Zip code

tsmith.phd@smithvance.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Timothy Smith

240

393-6401

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

\$70.00 Filing Fee

\$78.75 Filing Fee &  
Certificate of Status

\$78.75 Filing Fee &  
Certified Copy

\$87.50 Filing Fee,  
Certificate of Status &  
Certified Copy



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 10, 2018

TIMOTHY R SMITH  
50 BISCAYNE BOULEVARD, UNIT 2610  
MIAMI, FL 33132

SUBJECT: SMITH VANCE, INC.  
Ref. Number: W18000080511

We have received your document for SMITH VANCE, INC.. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$78.75. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

Please return 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) 245-6052.

Neysa Culligan  
Regulatory Specialist II

Letter Number: 618A00018651

2018 SEP 10 10:00 AM  
INFLUENCE SERVICES

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. SmithVance, Inc
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware 3. 82-3893324
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 01/02/2018 5.
(Date of incorporation) (Date of duration, if other than perpetual)

6.
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 333 SE 2nd Avenue, Suite 2000
(Principal office address)

Miami, FL 33131
(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Timothy R Smith

Office Address: 50 Biscayne Boulevard, #2610

Miami, FL Florida 33132
(City) (Zip code)

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2018 SEP 19 PM 3:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

[Handwritten Signature]
(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: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

**B. OFFICERS**

President: Timothy Robert Smith

Address: 50 Biscayne Boulevard, Unit 2610

Miami, FL 33132

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Secretary: \_\_\_\_\_

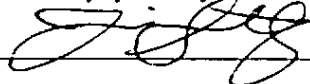
Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

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2018 SEP 19 PM 3:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12.  \_\_\_\_\_  
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.

13. Timothy Smith \_\_\_\_\_

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

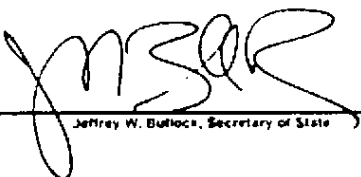
# Delaware

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SMITHVANCE, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FOURTH DAY OF JULY, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SMITHVANCE, INC." WAS INCORPORATED ON THE SECOND DAY OF JANUARY, A.D. 2018.



Jeffrey W. Bullock, Secretary of State

6691220 8300

SR# 20185811347

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 203121215

Date: 07-24-18