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(((H21000421298 3)))



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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : GERALD WEINBERG, P.C.

Account Number : I20030000043 Phone : (800)342-9856

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FOREIGN PROFIT/NONPROFIT CORPORATION HANSONS ADVISORS CORP.

Certificate of Status	0
Certified Copy	1
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NOV _ ZUZI

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT H210004313983

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.

HANSON ADV					
(Enter name of c	orporation; must include "TNCORPORATED," "(orp," "Inc," "Co," or "Corp.")	COMPANY," "CORPORATION,"			
~~	able in Florida, enter alternate corporate name ado	nted for the autoope of transacting h	ousiness in Florida)		
DELYMADE	able in Fiorica, enter alternate corporate name acco	pted for the purpose of transacting e	, and the state of		
2.	y under the law of which it is incorporated)	(FEI number, if applicable)			
06/17/2021	y ander the law of minor to the prince,				
4. (Date	of incorporation)	(Date of duration, if other than perpetual)			
6.	•				
o,	(Date first transacted business in FI				
1 +120 0 000 000	(SEE SECTIONS 607.1501 & 607.1502, TON LAKES DRIVE, FORT MYERS, FLORIDA				
7	(Principal office				
	(**************************************	<u></u> ,			
	(Current mailing a	ddress, if different)			
			7021		
8. Name and stre	et address of Florida registered agent: (P.O. E	ox <u>NOT</u> acceptable)	<u> </u>		
Name:	JEFFREY R. HANSON	_	5		
Office Address:	14170 REFLECTION LAKES DRIVE	•			
	FORT MYERS	, Florida 33907	AH IO: 50		
	(City)	(Zip code)	F 0		

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.

Nov. 15. 20 A. DIRECTORS	21 10:27AM GEALD WEINBERG 43	1298	3)	No. 8582 P. 3/4		
☐ Chairman	Name:	□ Chairman	Name:			
	Address: 14170 REFLECTION LAKES	□Vice Chairman	Address:			
■Director	DRIVE	□Director	<u>-</u>			
President	FORT MYERS, FL 33907	□President				
□Vice President		□Vice President				
□ Secretary	. □Treasurer	□Secretary		□Treasurer		
□Other	Other	□Other		□ Other		
Chairman	Name:	□ Chairman	Name:			
□Vice Chairman	Address:	□ Vice Chainnan	Address:			
Director		Director				
□President		□President				
□Vice President		□Vice President				
Secretary	Treasurcr	□Secretary		☐Treasurer		
Other	□ Other	□Other		□Other		
□ Chairman	Name:	□ Chairman	Name:			
□Vice Chairman	Address:	□Vice Chairman	Address:			
Director		□Director				
President		□President				
□Vice President		□Vice President				
☐ Secretary	[]Treasurer	☐Secretary		□Treasurer		
□Other	Other	□Other		Other		
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.						
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. JEFFREY R. HANSON, PRESIDENT						

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

<u>Delaware</u>

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The First State

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

DELAWARE, DO HEREBY CERTIFY "HANSON ADVISORS CORP." 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 FIFTEENTH DAY OF NOVEMBER, A.D.

2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HANSON ADVISORS CORP." WAS INCORPORATED ON THE SEVENTEENTH DAY OF JUNE, A.D. 2021.

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

6012036 8300

SR# 20213793077

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

Jamery W. Bassel B. Sacretary of State

Authentication: 204685127

Date: 11-15-21

(1101-1101-105-