

F140000001332

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

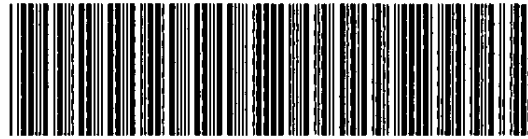
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

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14 MAR 24 PM 12:03  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

08/16/13



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

14 MAR 24 AM 10:08

FLORIDA DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

August 21, 2013

JEFF RAMEY  
ADVANCED HEALTH SCIENCES, INC.  
777 SOUTH FLAGLER DRIVE, SUITE 800 W TOW  
WEST PALM BEACH, FL 33401

SUBJECT: ADVANCED HEALTH SCIENCES, INC.  
Ref. Number: W13000046632

We have received your document for ADVANCED HEALTH SCIENCES, INC. and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

*A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.*

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Ruby Dunlap  
Regulatory Specialist II

Letter Number: 313A00019994

**RECEIVED** AUG 26 2013

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Advanced Health Sciences, 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:

Jeff Ramey

Name of Person

Advanced Health Sciences, Inc.

Firm/Company

777 S. Flagler Dr. Suite 800 West Tower

Address

West Palm Beach, FL 33401

City/State and Zip code

jeffr@advancedhealthsciences.com

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

For further information concerning this matter, please call:

Jeff Ramey

Name of Person

at ( 513 ) 490-2002

Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

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

**MAILING ADDRESS:**

New Filing 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

**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 Health Sciences, 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. Las Vegas, Nevada

(State or country under the law of which it is incorporated)

3. 27-3667759

(FEI number, if applicable)

4. 10/13/2010

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. May 1, 2013

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

7. 777 S. Flagler Dr. Suite 800 West Tower, West Palm Beach, FL 33401

(Principal office address)

777 S. Flagler Dr. Suite 800 West Tower, West Palm Beach, FL 33401

(Current mailing address)

8. Dietary Supplements

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

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

Name: Jeff Ramey

Office Address: 1237 Bay View Way

Wellington

(City)

, Florida 33414

(Zip code)

10. **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)

11. 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.

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

12. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: Jeff Ramey

Address: 1237 Bay View Way, Wellington, FL 33414

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

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

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

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

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

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

**B. OFFICERS**

President: Jeff Ramey

Address: 1237 Bay View Way, Wellington, FL 33414

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

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

Secretary: Jeff Ramey

Address: 1237 Bay Bay Way, Wellington, FL 33414

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

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

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

13.  \_\_\_\_\_  
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 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.

14. Jeff Ramey

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

# SECRETARY OF STATE




## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **ADVANCED HEALTH SCIENCES, INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since October 1, 2010, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on March 19, 2014.



  
ROSS MILLER  
Secretary of State

Electronic Certificate  
Certificate Number: C20140319-0989  
You may verify this electronic certificate  
online at <http://www.nvsos.gov/>