F19000001164

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
ied Copies Certificates of Status					
ecial Instructions to Filing Officer:					

Office Use Only

W19-22125



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02/19/19--01037--019 **70.00

SECRETARY OF STATE

M. MILLIGAN MAR 12 2019 March 7, 2019

AV-AMERICA INC. KIP CADE 8249 PARKLINE BLVD., STE 300 ORLANDO. FL 32809

SUBJECT: AV-AMERICA INC. Ref. Number: W19000022125

We have received your document for AV-AMERICA INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

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) 245-6051.

Letter Number: 519A00004681

Michelle Milligan Senior Section Administrator

www.sunbiz.org

COVER LETTER

то:	Registration Section Division of Corpor				
CHDI	JECT:	AV-AMERICA IN	C,		
SUDA	ECT:	Name of corporat	ion	- must include suffix	
Dear S	Sir or Madam:				
"Certi	ficate of Existence,"	by Foreign Corporation f or "Certificate of Good S orporation to transact bus	tano	ding" and check are sub	et Business in Florida," omitted to register the
Please Kip Ca	•	dence concerning this ma	lter	to the following:	
		Name	of F	erson	
AV-A	MERICA INC.				
		Firm/C	omp	Dany	
8249 F	Parkline Blvd, Suite 30	0			
		Ad	dre	SS	·
Orland	lo, Florida 32809				
	-	City/State	an 2 an	d Zip code	
kip.c@)av-america.com				
		E-mail address; (to be use	d fe	or future annual report i	notification)
For fu	rther information cor	cerning this matter, pleas	e ci	ıll:	
Kip Cade		1-800-480-6229			
	Name of Person	at (at C		Daytime Telep	hone Number
Enclos	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Ce Tallahassee, FL 33 sed is a check for the	n ations nter Circle 2301		MAILING A Registration S Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7
3 \$70	0.00 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

COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO GISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

AV-AMERICA	NC		
	corporation: must include "INCORPORATED," Corp." "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,"	
[If name unavail	able in Florida, enter alternate corporate name ad	opted for the purpose of transacting busines	ss in Florida)
DELAWARE		3-0541280	
(State or countr April, 30th 2018	zy under the law of which it is incorporated)	(FEI number, if applicable)	
	5		
(Date	e of incorporation)	(Date of duration, if other than per	oetual)
NA			
3249 PARKLINI	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.150 E BLVD, SUITE 300 ORLANDO, FLORIDA	2, F.S., to determine penalty liability)	2
	(Principal	office address)	2019 HAR
, ,	(Current mailing	address, if different)	ARY ASSE
Name and stree	et address of Florida registered agent: (P.O.	Box NOT acceptable)	
Name:	KIP CADE	·	PM 1: OF
fice Address:	8249 PARKLINE BLVD SUITE 300		P**
	ORLANDO	32809 , Florida	
	(City)	(Zip code)	

Registered agent's acceptance:

ving been named as registered agent and to accept service of process for the above stated corporation at the place signated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I ther agree to comply with the provisions of all statutes relative to the proper and complete performance of my ties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

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

DIRECTORS	
irman:	
fress:	
e Chairman:	· · · · · · · · · · · · · · · · · · ·
fress:	
ector:	75 Z
lress:	
ector:	me 👱 📑
lress:	
	2™ ∓
OFFICERS	
sident:	
ress:	
	 _
President:	
8249 Parkline Blvd Suite 300	
Orlando, Florida 32809	-
etary;	
ress:	,
isurer:	
ress:	<u> </u>
TE: If necessary, you may attach an addendam to the application listing	additional officers and/or directors.
Signature of Director of Officer officer or director signing this document (and who is listed in number 11 true and that he or she is aware that false information submitted in a docuird degree felony as provided for in s.817.155, F.S.	l above) affirms that the facts stated herein iment to the Department of State constitutes
KIP CADE, Vice President	<u> </u>
(Typed or printed name and capacity of person signi-	ng application)

Names and business addresses of officers and/or directors:



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

DELAWARE, DO HEREBY CERTIFY "AV-AMERICA 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 EIGHTH DAY OF MARCH, A.D. 2019.

Authentication: 202406092

Date: 03-08-19