Division of Corporations



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To:

Division of Corporations

Fax Number

: (850)617-6383

Erom:

Account Name .: INCORP SERVICES INC

Account Number : I20120000007 2hone

: (702)866-2500

Fax Number

: (702)866-2689

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

### FOREIGN PROFIT/NONPROFIT CORPORATION

#### Avanze Solutions Inc

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## COVER LETTER

	rporations	AVANZE SOI	TITIONS INC	
SUBJECT:				
	Name	of corporation -	must include suffix	
Dear Sir or Madam:				
	ce," or "Certificat	e of Good Standi	uthorization to Transact Business ng" and check are submitted to re in Florida.	
Please return all corres	pondence concern	ing this matter to	the following:	
	•	Janice No	ıll	
		Name of Pe	rson	
		InCorp Servi	es, Inc.	
		Firm/Compa	ıny	<del></del>
	3773 Howa	rd Hughes Park	way Suite 500S	
		Address	;	
	L	as Vegas, NV 8	9169-6014	
		City/State and	Zip code	2
		documents@u	7	
,	E-mail addres	s: (to be used for	future annual report notification	EESE T
For further information	concerning this n	natter, please cal	l:	2019 SEP 11
tice Null for InCorp S	Services, Inc.	702	866-2500 ext. 6902	P
Name of Perso	on	Area Code	Daytime Telephone Numb	ier —
STREET/COU Registration Se Division of Co Clifton Buildin 2661 Executive Tallahassee, FI	rporations g c Center Circle	:S:	MAHLING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a check for	the following am-	ount:		
■ \$70.00 Filing Fee	☐ \$78.75 Filin Certificate		Certified Copy Certi	0 Filing Fee, ficate of Statu fied Copy

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## H19000272363 3

# 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.

	orporation; must include "INCORPORATI orp," "Inc," "Co," or "Corp.")	ED," "	CUMPANY," "CORPORATION,"	
			, •	
(If name unavail:	able in Florida, enter alternate corporate na	me ado	opted for the purpose of transacting bu	isiness in Florida)
Delaware		2		
(State or countr	y under the law of which it is incorporated	) —	(FEI number, if applicable)	
November 9	, 2015	5	Perpenial	
(Date	of incorporation)	<i>-</i> -	(Date of duration, if other than perpetual)	
Upon registr	ation			•
	•		, F.S., to determine penalty liability)	
5323 Millen	ia Lakes Blvd., Suite 300, Orlando,	FL 32		
5323 Millen	ia Lakes Blvd., Suite 300, Orlando,	FL 32	2839 office address)	20
Name and stree	ia Lakes Blvd., Suite 300, Orlando,	FL 32 incipal	2839 office address) address, if different)	2819 SEP 1 1 F
Name and stree	(Current met address of Florida registered agent:	FL 32 incipal	2839 office address) address, if different)	2019 SEP 1 1 PH 1:
Name and stree	(Current met address of Florida registered agent: InCorp Services, Inc.	FL 32 incipal	2839 office address) address, if different)	EP

#### 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.

Janice Null on behalf of InCorp Services, Inc.
(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.

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11. Names and business addresses of officers and/or directors:			
A. DIRECTORS			
Chnirman:		<del></del>	<u>_</u>
Address:	• •	<u> </u>	
			<u>_</u>
Vice Chairman:	<del></del>		
Address:			<u>.</u>
Director: Pradeep Kumar Venkateshapppa	<del></del>		
Address: #205, Suganthy Villa, 4th Cross, Kasturi Nagar, Bangalore			
Karnataka, India 560043	·		
Director. Vinod Joseph Kainikat			
Address: #208, Tulip Block, Rakesh Fantacy Garden, 2nd Main, Kasturi Nagar, I	Bangalore		
Karnataka, India 560043	·	·	
B. OFFICERS			
President: Pradeep Kumar Venkateshapppa		~_	
Address: #205, Suganthy Villa, 4th Cross, Kasturi Nagar, Bangalore		019	
Kamataka, India 560043	•···	SEF	: B
Vice President:			
Address:		q	
	<u></u>		
Secretary. Vinod Joseph Kainikat	1		
Address: #208, Tulip Block, Rakesh Fantacy Garden, 2nd Main, Kasturi Nagar, E	Sangalore, Karna	taka, Ind	 lia 560043
Pradeep Kumar Venkateshapppa			<del></del>
#205, Suganthy Villa, 4th Cross, Kasturi Nagar, Bangalore, Karnataka,	India 560043		
NOTE: If necessary you may attach an addendum to the application listing additional	officers and/or di	rectors	
12 Muhminu			
Signature of Director or Officer  The officer of director signing this document (and who is listed in number 11 above) af are true and that he or she is aware that false information submitted in a document to the a third degree felony as provided for in s.817.155, F.S.			
13. Pradeep Kumar Venkateshappa, Presiden			
(Typed or printed name and capacity of person signing applicat	tion)		

2019.

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# Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "AVANCE SOLUTIONS 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 ELEVENTH DAY OF SEPTEMBER, A.D.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AVANZE SOLUTIONS INC" WAS INCORPORATED ON THE NINTH DAY OF NOVEMBER, A.D. 2015.

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

5872554 8300 SR# 20196982232

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

Jeffrey W. Bullack, Secretary of State

Authentication: 203573340

Date: 09-11-19

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