F20000005388

(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
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Special Instructions to Filing Officer:				
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COVER LETTER

	tration Section ion of Corporations				
SUBJECT:	ADVATIX, INC.				
501,01.01.	Name of	corporation	- must include suffix		
Dear Sir or M	ladam:				
"Certificate o	"Application by Foreign Corp f Existence," or "Certificate o ced foreign corporation to trai	f Good Star	Authorization to Transact Business in Flor ading" and check are submitted to register tess in Florida.	ida," he	
Please return	all correspondence concerning	g this matte	r to the following:		
TAMARA L.	HARPER, ESQ.				
		Name of	Person		
TAMARA L.	HARPER, APC				
		Firm/Con	npany		
141 DUESEN	BERG DRIVE, SUITE 7B				
	····	Addr	ess		
WESTLAKE	VILLAGE, CA 91362				
		City/State a	nd Zip code		
SHEENA@TA	SHEENA@TAMARAHARPER.COM				
	E-mail address:	to be used	for future annual report notification)		
For further in	formation concerning this mat	ter, please	call:		
SHEENA WO	RKMAN	805	409-0530	- •	
Nam	e of Person	Area Cod	Daytime Telephone Number	· (;	
Regis Divis The C 2415	EET/COURIER ADDRESS: stration Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 hassee, FL 32303		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
	check for the following amouneck payable to: FLORIDA DEFing Fee	PARTMENT Fee & [T OF STATE □ \$78.75 Filing Fee & □ \$87.50 Filin Certified Copy Certificate of Certified Co	of Status &	

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.

ADVATIX	, INC.			
	of corporation; must include "INCORPORATEL", "Corp.," "Inc.," "Co.," or "Corp.,")	O," "COMPANY," "CORPORATION,"		
(If name un	available in Florida, enter alternate corporate nam	e adopted for the purpose of transacting bus	siness in Florida)	
2. DELAWA	RE 3			
(State or co	ountry under the law of which it is incorporated)	(FEI number, if applicable)		
4. 2/09/2016	5	n/a		
	Date of incorporation)	(Date of duration, if other than	perpetual)	
6.				
	(SEE SECTIONS 607.1501 & 607.	in Florida, if prior to registration) 1502, F.S., to determine penalty liability)		
7. 2625 TOWN	SGATE ROAD, SUITE 330, WESTLAKE VIL	LAGE, CA 91361		
	(Principal of	fice street address)		
2625 TOW	NSGATE ROAD, SUITE 330, WESTLAKE VII.	LLAGE, CA 91361		
	(Current mail	ing address, if different)		
8. Name and	street address of Florida registered agent: (P.	O. Box NOT acceptable)		
Nam	e: InCorp Services, Inc.			
Office Address:	17888 67th Court North			
	Loxahatchee	, Florida <u>33470</u>		
	(City)	(Zip code)		

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.

Yara Alfaro-Sullivan 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.

A. DIRECTORS MANISH KAPOOR Name: _____ □Chairman Name: □ Chairman □ Vice Chairman ☐ Vice Chairman Address: _____ Address: 2625 TOWNSGATE ROAD, SUITE 330 ☐ Director Director WESTLAKE VILLAGE, CA 91361 ■ President □President □Vice President _____ ☐ Vice President Treasurer □ Secretary □ Treasurer **■**Secretary □Other _____ Other____ □Other _____ Name: _______ □Chairman : Name: _____ □ Chairman □Vice Chairman Address: _____ □Vice Chairman Address: _____ □ Director Director □President □President ☐ Vice President □Vice President _____ □Treasurer ☐ Treasurer ☐ Secretary □ Secretary □Other _____ □Other _ □ Other _____ □Other _____ Name: Name: ☐Chairman □ Chairman ☐ Vice Chairman Address: □ Vice Chaiπnan Address: ______ □ Director □Director □President □ President □Vice President □Vice President □ Secretary □Treasurer □ Secretary □Treasurer □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. Martin 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.

MANISH KAPOOR

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

DELAWARE, DO HEREBY CERTIFY "ADVATIX, 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 SIXTH DAY OF OCTOBER, A.D. 2020.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ADVATIX, INC."

WAS INCORPORATED ON THE NINTH DAY OF FEBRUARY, A.D. 2016.

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

(27) 130 F N II

at soon delaware gov/aut

Authentication: 203806299

Date: 10-06-20

Tamara L. Harper, J.D., AEP*
Karen L. Stiehl, J.D., of Counsel



Sheena E. Workman, Law Glerk Leanne J. Collier, Logal Secretary

November 24, 2020

Via Fed Ex

Florida Department of State Division of Corporations Attn: Sharon D. Franklin The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

> Re: Ref. Number W20000128159 Letter No. 020A00022247

Dear Ms. Franklin.

This letter is in response to your letter no. 020A00022247. Advatix, Inc., a domestic corporation dissolved September 29, 2020, releases the name to Advatix, Inc. to transact business as a foreign corporation. Advatix, Inc., the domestic corporation, has no intention of revoking the dissolution. Advatix, Inc. was filed as a domestic corporation in error. Advatix, Inc. is now filing as a foreign corporation in Florida.

I am resubmitting the Application By Foreign Corporation for Authorization to Transact Business in Florida. Please note that we did not receive our check no. 1315 for the \$70.00 filing fee returned back to us with your November 6, 2020 letter. Please advise if you have disposed of this check and need us to resend a new one or submit payment online. Please process this application and send us a filed copy in the enclosed SASE.

Should you have any questions, please feel free to contact my law clerk. Sheena Workman at sheena@tamaraharper.com directly or call my office at (805) 409-0530. I thank you for your prompt attention to this matter.

Very truly yours,

TAMARA L. HARPER,

A PROFESSIONAL CORPORATION

By:

Tamara L. Harper, Esquire

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FLORIDA DEPARTMENT OF STATE Division of Corporations

November 6, 2020

TAMARA L HARPER 141 DUESENBERG DRIVE STE 7B WESTLAKE VILLAGE, CA 91362 US

SUBJECT: ADVATIX, INC. Ref. Number: W20000128159

We have received your document for ADVATIX, 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):

The name designated in your document is unavailable since it is the same as or not distinguishable from the name of a voluntarily dissolved business entity. This name is not available for the assumption or use by another entity for 120 days after the effective date of the dissolution. The dissolved business entity may provide the Department of State with an affidavit or letter, releasing the name for use to you and affirming they have no intention of revoking the dissolution or you may adopt an alternate name for use in Florida. If you choose to adopt an alternate name, please enter that name in the space provided in number one of the application.

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.

Sharon D Franklin Regulatory Specialist II

RECEIVED NOV 30 2020

Letter Number: 020A00022247