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COVER LETTER

	istration Section ision of Corporations				
	Avante Advertising, Inc.				
SUBJECT	Name of	corporation -	must include suffix	<u>-</u>	
Dear Sir or l	Madam:				
"Certificate	d "Application by Foreign Corp of Existence," or "Certificate o nced foreign corporation to tran	f Good Standi	uthorization to Transact Business in Fl ng" and check are submitted to registe in Florida.	orida," r the	
Please return	n all correspondence concerning	g this matter to	the following:		
Samantha Jac	ekson				
		Name of Po	rson		
Meriam Corp	porate Services, Inc.				
		Firm/Compa	any		
PO Box 5258	38				
		Address	3	76	
Mesa AZ 852	208			2F21 F	
		City/State and	Zip code		
meriamfinan	cial@gmail.com			12	
	E-mail address: (to be used for	future annual report notification)		
For further information concerning this matter, please call:					
Samantha Jac	amantha Jackson at (720 318.8456		318.8456	-	
Nar	ne of Person	Area Code	Daytime Telephone Number		
Reg Divi The 241:	REET/COURIER ADDRESS: istration Section sion of Corporations Centre of Tallahassee 5 N. Monroe Street, Suite 810 ahassee, FL 32303		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Enclosed is a Please make o	a check for the following amount theck payable to: FLORIDA DEP ling Fee	ARTMENT OF STREET OF STREET STREET OF STREET OF STREET STREET OF S	878.75 Filing Fee & 💢 🔲 \$87.50 Fil	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.

Avante Advertis	sing, Inc.	_			
(Enter name of c	orporation; must include "INCORPORAT orp," "Inc," "Co," or "Corp.")	ED." "0	COMPANY," "CORPORATION,"		
(If name unavail	able in Florida, enter alternate corporate na	ıme ado	oted for the purpose of transacting bu	siness in Florida)	
Colorado	3. 82-3648367		3648367		
(State or countr	(State or country under the law of which it is incorporate		(FEI number, if applicable)		
12/08/2017		5.			
(Date	of incorporation)	·	(Date of duration, if other than perpetual)		
·	(Date first transacted busine	ss in Flo	orida, if prior to registration)		
	•	7.1502,	F.S., to determine penalty liability)		
1444 Biscayne Bl	lvd Ste 213 Miami FL 33132				
	(Principal	office s	<u>treet</u> address)		
	(Current m	ailing a	Idress, if different)		
				261 E	
. Name and stree	et address of Florida registered agent:	(P.O. B	ox <u>NOT</u> acceptable)	 1	
	Emilio Mayagoitia				
Name:			_	73	
ffice Address:	1444 Biscayne Blvd Ste 213		_	-7:	
	Miami		. Florida 33132	 	
	(City)		(Zip code)	12. 12.	

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.

A. DIRECTORS	Emilio Mayagoitia			
☐ Chairman	Name: 1444 Biscayne Blvd Ste 213	☐ Chairman	Name:	
□Vice Chairman	Address:	□ Vice Chairman	Address:	
Director	Miami FL 33132	□Director		<u> </u>
President		□President		
□Vice President		□ Vice President		
■ Secretary	■ Treasurer	☐ Secretary		□Treasurer
Other	□Other	Other		Other
Chairman	Name:	☐ Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
□Director		□Director	···	
□President		□President		<u></u>
□Vice President		□Vice President		
Secretary	□Treasurer	☐ Secretary		□Treasurer
Other	Other	Other	<u> </u>	Other
				~)
□ Chairman	Name:	□Chairman	Name:	
□Vice Chairman	Address:	□ Vice Chairman	Address:	. 1
□Director		□Director		
□President		□President	 -	
□Vice President		□ Vice President		<u></u>
Secretary	□Treasurer	☐ Secretary		□Treasurer
Other	Other	□Other		□Other
Important Notice: individuals may be	Use an attachment to report more than six (6). The added to the index when filing your Florida Department of the state of	e attachment will be image artment of State Annual Re ctor or Officer	port form.	
The officer or direct she is aware that fa s.817.155, F.S.	ctor signing this document (and who is listed in males information submitted in a document to the D	umber 11 above) affirms the epartment of State constitution	at the facts stat- tes a third degr	ed herein are true and that he or ee felony as provided for in

OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

CERTIFICATE OF FACT OF GOOD STANDING

I, Jena Griswold, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

Avante Advertising, Inc.

is a

Corporation

formed or registered on 01/01/2018 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20171916910.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 02/03/2021 that have been posted, and by documents delivered to this office electronically through 02/04/2021 @ 10:15:15.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 02/04/2021 @ 10:15:15 in accordance with applicable law. This certificate is assigned Confirmation Number 12916730 .



Secretary of State of the State of Colorado

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an opiion, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's Web site, http://www.sos.state.co.us/bi://CertificateSearchCriteria.do entering the certificate confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, http://www.sos.state.co.us/click Businesses, trademarks, trade names and select Frequently Asked Questions."

*************End of Certificate******