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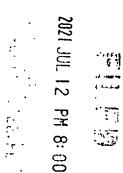
(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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COVER LETTER

_	tration Section ion of Corporations					
SUBJECT:	Lee Beaver & Associates Inc.					
302020.	Name o	of corporation	n - must ir	nclude suffix		
Dear Sir or M	adam:					
"Certificate o	"Application by Foreign Co f Existence," or "Certificate ced foreign corporation to tr	of Good Star	nding" and	d check are submitted		
Please return	all correspondence concerni	ng this matte	r to the fo	ollowing:		
Barbara Costa						
	•	Name of	Person			
Lee Beaver & .	Associates Inc.				:	70
	-	Firm/Con	npany		·•	7
8100 Ashton A	ve. # 103					= "
	,	Addr	ess			2
Manassas, VA	20109					PH
		City/State a	and Zip co	ode		00 :8 H4
barbaracosta@					م	. 8
	E-mail address	: (to be used	for future	annual report notific	cation)	
For further in	formation concerning this m	atter, please	call:			
Barbara Costa		703-853-2	287)			
Name	c of Person	Area Cod	le	Daytime Telephone	Number	_
Regis Divis The C 2415	EET/COURIER ADDRESS tration Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 hassee, FL 32303			MAILING ADDR Registration Section Division of Corpora P.O. Box 6327 Tallahassee, FL 32	n ations	
	check for the following amo eck payable to: FLORIDA DE ing Fee	EPARTMENT g Fee & - [□ \$78.75		\$87.50 Filio Certificate Certified C	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.

	corporation; must include "INCORPORATED," "Corp," "Inc," "Co," or "Corp.")	COMPANY," "CORPORATIO	N,"		
(If name unavai	able in Florida, enter alternate corporate name ado	pted for the purpose of transacting	g business in Florida)		
Virginia	3.				
(State or count	ry under the law of which it is incorporated)	(FEI number, if ap	(FEI number, if applicable)		
03/08/1995					
(Date of incorporation) 5.		(Date of duration, if other	than perpetual)		
100 Ashton Ave	(Date first transacted business in Flo (SEE SECTIONS 607.1501 & 607.1502,		ty)		
100 Ashton Ave		F.S., to determine penalty liabili	ty)		
3100 Ashton Ave	(SEE SECTIONS 607.1501 & 607.1502, c, Suite 103, Manassas, VA 20109	F.S., to determine penalty liabili treet address)			
	(SEE SECTIONS 607.1501 & 607.1502, c, Suite 103, Manassas, VA 20109 (Principal office <u>s</u>	F.S., to determine penalty liabili treet address) dress, if different)			
	(SEE SECTIONS 607.1501 & 607.1502, e, Suite 103, Manassas, VA 20109 (Principal office section (Current mailing ac	F.S., to determine penalty liabili treet address) dress, if different)	2021 JUL 12		
Name and stree	(SEE SECTIONS 607.1501 & 607.1502, s, Suite 103, Manassas, VA 20109 (Principal office some content mailing act address of Florida registered agent: (P.O. B.)	F.S., to determine penalty liabili treet address) dress, if different)	2021 JUL 12		
Name and stree	(SEE SECTIONS 607.1501 & 607.1502, e, Suite 103, Manassas, VA 20109 (Principal office sometime and the standards of Florida registered agent: (P.O. Bound InCorp Services, Inc. 17888 67th Court North	F.S., to determine penalty liabili treet address) dress, if different)			

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.

Jackie DeFilippis on behalf of InCorp Services, In-

(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.

☐ Chairman Name:		□Chairman	Name:	. 1	
□Vice Chairman	Address:	□Vice Chairman			
□Director	·	□Director			
President		□President			
□Vice President		□Vice President			
■ Secretary	Treasurer	☐Secretary	□Treasurer		
Other	□Other	□Other		Other	
☐ Chairman	Name: ELEANOR ANDREA	BEAUE R Chairman	Name:		
☐ Vice Chairman	Address: 8100 :ASHTOWAV	e Vice Chairman	Address:		
Director		□Director			
President		□President			
□Vice President		□Vice President			
Specificary PICHARD	CORRADO CHERYL CORPO	A⊅O □Secretary		□Treasurer	
□Other SIDD AS	HTON AUE 8100 AS HTD	NAUEOther ± 103		Other 202	
MAHASS □Chairman	Name:	ら、いん Olog □Chairman	Name:	101	
□Vice Chairman	Address:	□ Vice Chairman	Address:	,	
□Director		□Director		<u> </u>	
□President		□President		00	
□Vice President		□Vice President			
□Secretary □Treasurer		□Secretary		□Treasurer	
Other	Other	Other		□Other	
individuals níay be	Use an attachment to report more than six (6). The added to the index when filing your Florida Department	e attachment will be imaged artment of State Annual Re	I for reporting port form.	purposes only. Non-ind	
12	Signature of Direc	utoz oz Office			

DocuSign Envelope ID: 4C8C156A-997A-4980-9AD1-7AA82451527D

13. Eleanor Andrea Beaver

Commontorealthor Hirginia



State Corporation Commission

CERTIFICATE OF GOOD STANDING

I Certify the Following from the Records of the Commission:

That LEE BEAVER & ASSOCIATES, INC. is duly incorporated under the law of the Commonwealth of Virginia;

That the corporation was incorporated on March 8, 1995;

That the corporation's period of duration is perpetual; and

That the corporation is in existence and in good standing in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.



Signed and Sealed at Richmond on this Date:

April 22, 2021

Bernard J. Logan, Clerk of the Commission



June 15, 2021

BARBARA COSTA 8100 ASHTON AVE #103 MANASSAS, VA 20109 US

SUBJECT: LEE BEAVER & ASSOCIATES, INC.

Ref. Number: W21000087253

We have received your document for LEE BEAVER & ASSOCIATES, 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 registered agent must sign accepting the designation.

You must list the names and street addresses of the officers and directors of the corporation on the form/application.

Each officer should be in separate sections on the application along w/ their title and address.

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

Letter Number: 421A00013352

RECEIVED
JUL 1 2 2021