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(((H22000028087 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INCORP SERVICES INC

Account Number : I20120000007

Phone : (702)866-2500

Fax Number

: (702)900-2290

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

Email Address: managedreports@incorp.com

FOREIGN PROFIT/NONPROFIT CORPORATION

Broadcreek Marketing Associates, Inc.

Certificate of Status	0
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JAN 24 2022

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COVER LETTER

TO:	Registration Section Division of Corporations							
SUBJ	ъcт.	Broadcr	eek Marketing As	sociates, ir	nc.			
SODO	ECI.		Name of	corporation	ı - musi	include suffix	 	
Dear S	ir or M	adam;						
"Certif	ficate o	Existenc		f Good Stat	ading" s	ind check are subr	t Business in Florida," mitted to register the	
Please	return :	all corresp	ondence concerning	g this matte	r to the	following:		
				Heather	Glenn			
******				Name of				
			In	Corp Serv	ices, ir	1C.		
				Firm/Con	прапу	, • • • • • • • • • • • • • • • • • • •		
			3773 Howa	rd Hughes	Pkwy.	Suite 500S		
				Addr	ess			
			Las \	∕egas, NV	89169	-6014		
·				City/State a	ınd Zip	code		
			mana	agedreports	@incor	p.com		
			E-mail address;	(to be used	for futu	re annual report n	otification)	
For fur	rther in	formation	concerning this mat	tter, please	call:			
Heather (Glenn on	behalf of I	Corp Services, Inc.	,		800-246-2677		
	Naru	of Perso		Area Cod	le	Daytime Teleph	ione Number	
	Regis Divis The C 2415	tration Se ion of Cor lentre of T	porations Fallahassee e Street, Suite 810			MAILING AI Registration So Division of Co P.O. Box 6327 Tallahassee, F.	ection orporations 7	
Please	make ch	check for eck payabl ng Fee	the following amou te to: FLORIDA DES \$78.75 Filing Certificate of	ARTMENT Fee & [□ \$78.7	FATE 15 Filing Fee & fied Copy	S87.50 Filing Fee, Certificate of Status Certified Copy	8

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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.

	Marketing Associates, Inc.		
	orporation; must include "INCORPORATE orp," "Inc," "Co," or "Corp.")	D," "COMPANY," "CORPORATIO	N,"
'	able in Florida, enter alternate corporate nar	ne adopted for the purpose of transacti	ng business in Florida)
California		3. (FEI number, if a	
(State or countr	y under the law of which it is incorporated)	(FEI number, if a	pplicable)
05/22/2006		5. (Date of duration, if other	
•	of incorporation)	(Date of duration, if other	than perpetual)
Upon Filing			
		is in Florida, if prior to registration) 7.1502, F.S., to determine penalty liabi	lity)
16411 Carme	nita Road, Cerritos, CA 90703		
	(Principal	office street address)	
	•		
	(Cwrent ma	iling address, if different)	
			22
Name and stre	et address of Florida registered agent; (P.O. Box NOT acceptable)	<u> </u>
	InCorp Services, Inc.		
Manual			1 32
Name:	17888 67th Court North		
	17888 67th Court North		- FI D
	17888 67th Court North Loxahatchee		် ကြုံ - လူ U
		, Florida 33470 (Zip code)	- FM 32 21
fice Address: Registered ag aving been nan signated in this rther agree to 0	Loxahatchee (City) ent's acceptance: ned as registered agent and to accept se application, I hereby accept the appoint comply with the provisions of all statute with and accept the obligations of my	(Zip code) ervice of process for the above stat intinent as registered agent and ag es relative to the proper and compi position as registered agent.	ed corporation at the place to act in this capacilete performance of my
fice Address: Registered ag aving been nan signated in this rther agree to 0	Loxahatchee (City) ent's acceptance: ned as registered agent and to accept se application, I hereby accept the appoint comply with the provisions of all statute with and accept the obligations of my	(Zip code) ervice of process for the above stat ntment as registered agent and ag es relative to the proper and compl	ed corporation at the place to act in this capacitiete performance of my

^{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.

^{11.} For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

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A. DIRECTORS				
□ Chairman		lexander Luis Alvarez	□ Chairman	Name: Hating Liu
□Vice Chairman	Address:	16411 Carmenita Road	□Vice Chairman	Address: 16411 Carmenita Road
Director		Cerritos, CA 90703	■ Director	Cerritos, CA 90703
■ President	,		□President	
□Vice President			□Vice President	
□ Secretary		□Treasurer	☐ Secretary	☐Treasurer
CEO Other		■Other CFO	□ Other	Other
DChairman	Name:		□Chairman	Namc:
□Vice Chairman	Address: _		□Vice Chainman	Address:
Director			□Director	
JPresident	·		□President	
Vice President			□Vice President	-
Secretary		Tressurer	□Scoretary	☐Treasurer
]Other		□Other	Other	Other
]Chairman	Name:		□ Chairman	Name:
IVice Chairman	Address:		Ovice Chairman	Address:
Director			Director	
President _			□ President	
Vice President			□Vice President	
Secretary		☐Treasurer	☐Secretary	□Treasurer
Other		□Other	Other	Other
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· 1	Refaus	lu (Myaya Signature of Direct	0.85	
	•	Signature of Direct	or or Otticer	t the facts stated herein are true and that he

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13. Alexander Luis Alvarez, President

(Typed or printed name and capacity of person signing application)

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I, SHIRLEY N. WEBER, Ph.D., Secretary of State of the State of California, hereby certify:

Entity Name: BROADCREEK MARKETING ASSOCIATES, INC.

File Number: C2895265 Registration Date: 05/22/2006

Entity Type: DOMESTIC STOCK CORPORATION

Jurisdiction: CALIFORNIA

Status: ACTIVE (GOOD STANDING)

As of January 19, 2022 (Certification Date), the entity is authorized to exercise all of its powers, rights and privileges in California.

This certificate relates to the status of the entity on the Secretary of State's records as of the Certification Date and does not reflect documents that are pending review or other events that may affect status.

No information is available from this office regarding the financial condition, status of licenses, if any, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of January 20, 2022.

SHIRLEY N. WEBER, Ph.D. Secretary of State

Certificate Verification Number: Y6DA53Z

To verify the issuance of this Certificate, use the Certificate Verification Number above with the Secretary of State Certification Verification Search available at bebizfile.sos.ca.gov/certification/index.