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SECRETARY OF STATE
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COVER LETTER

_	ration Section on of Corpora					
SUBJECT:	ALTUS WEA	LTH STRATEGIES, I	NC.			
SOBJECTA	<u> </u>	Name of corpo	oration - r	nust include suffix		
Dear Sir or Ma	ıdam:					
"Certificate of	Existence," o		d Standin	g" and check are subr	t Business in Florida," mitted to register the	
Please return a	II corresponde	ence concerning this	matter to	the following:		
Raymond P. O'	Connell					
		Na	me of Per	son		
Altus Wealth Si	trategies, Inc.					
		Fire	n/Compa	ıy		
2518 Burnsed E	Blvd, #510					
			Address		, , , , , , , , , , , , , , , , , , , 	
The Villages / I	Florida / 32163					
<u></u>		City/	State and	Zip code		
ray@altusbenet						
	6	-mail address: (to be	used for	future annual report n	otification)	
For further inf	ormation cond	erning this matter, p	lease call			
Raymond P. O'	Conneil	at (40-	1)	403-8074		
Name	of Person		ea Code	Daytime Telepl	none Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			Registration So Division of Co P.O. Box 6327	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
	ck payable to:	Collowing amount: FLORIDA DEPART \$78.75 Filing Fee & Certificate of Statu	હ □\$	F STATE 78.75 Filing Fee & Certified Copy	S87.50 Filing Fee. Certificate of Status & Certified Copy	

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.

L. ALTUS WEAL"	TH STRATEGIES, INC				
(Enter name of co	orporation; must include "INCORPORATED," orp," "Inc." "Co," or "Corp.")	"COMPANY," "CORPORATION	ď."		
(If name unavaila	ible in Florida, enter alternate corporate name ac	dopted for the purpose of transacting	g business in Florida)		
2. Georgia	3.				
(State or country	3 y under the law of which it is incorporated)	(FEI number, if ap	(FEI number, if applicable)		
4. 2/5/2005	5.				
	of incorporation)	(Date of duration, if other	(Date of duration, if other than perpetual)		
6. 12/12/2021					
1	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150 St. The Villages, FL 32163 (Principal officient, #510, The Villages, FL 32163		iy)		
	(Current mailing	address, if different)			
8. Name and <u>stree</u> Name: Office Address:			SECRETARY OF ST		
	(City)	(Zip code)	26 JRIDA		

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								
□Chairman	Name: Raymond P. O'Connell	□Chairman	Name:					
□Vice Chairman	Address: 2518 Burnsed Blvd., #510	□Vice Chairman	Address:					
□Director	The Villages, FL 32163	□Director						
□President		□President						
□Vice President		□Vice President						
□Secretary	□Treasurer	□Secretary		□Treasurer				
■Other		□Other		□Other				
□Chairman	Name:	□Chairman	Name:					
□Vice Chairman	Address: 2518 Burnsed Blvd., #510	□Vice Chairman	Address:					
□Director	The Villages, FL 32163	□Director						
□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						
□Vice President		□Vice President						
☐ Secretary	□Treasurer	☐ Secretary		□Treasurer				
□Other	Other	□Other	<u> </u>	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. 12. 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.

Control Number: 0512104

STATE OF GEORGIA

Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brad Raffensperger, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

ALTUS WEALTH STRATEGIES, INC.

a Domestic Profit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 22281649
Date Inc/Auth/Filed: 02/07/2005
Jurisdiction : Georgia
Print Date : 01/13/2022

Form Number : 211



Brad Raffensperger