

F23000003899

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

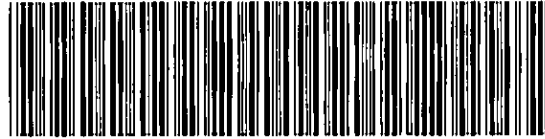
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

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FILED

2023 JUL -5 AM 10:24

SECRETARY OF STATE  
TALLAHASSEE, FL

2023 JUL -5 AM 11:28

# Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312

(850) 656-4724

DATE 07/05/2023

**\*\*WALK IN\*\***

ENTITY NAME G Adventures Development Inc.

DOCUMENT NUMBER \_\_\_\_\_

**\*\*PLEASE FILE THE ATTACHED AND RETURN\*\***

XXXXX

*Plain Copy*

*Certified Copy*

*Certificate of Status*

**\*\*PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY\*\***

*Certified Copy of Arts & Amendments*

*Certified Copy of Arts & Amendments Complete File (Including Annual Reports)*

*Certificate of Status*

*Certificate of Status Reflecting: \_\_\_\_\_*

**\*\*APOSTILLE' / NOTARIAL CERTIFICATION\*\***

COUNTRY OF DESTINATION \_\_\_\_\_

NUMBER OF CERTIFICATES REQUESTED \_\_\_\_\_

TOTAL OWED \$ 70

ACCOUNT # I20140000108  
United Corporate  
Services, Inc.

*Keith Leppard*

Please call Tina at the above number for any issues or concerns. Thank you so much.

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** G ADVENTURES DEVELOPMENT INC.  
\_\_\_\_\_

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Amy Allen

\_\_\_\_\_  
Name of Person

United Corporate Services, Inc.

\_\_\_\_\_  
Firm/Company

80 State Street, Suite 1101

\_\_\_\_\_  
Address

Albany, NY 12207

\_\_\_\_\_  
City/State and Zip code

joey.kelley@unitedcorporate.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

\_\_\_\_\_  
Name of Person

at (\_\_\_\_\_) \_\_\_\_\_

Area Code

Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee      ☐ \$78.75 Filing Fee & Certificate of Status      ☐ \$78.75 Filing Fee & Certified Copy      ☐ \$87.50 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.*

G ADVENTURES DEVELOPMENT INC.

1. \_\_\_\_\_  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

\_\_\_\_\_  
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Barbados 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 9-2-2019 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)

6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 44 School St Ste 505, Boston, MA 02108  
(Principal office address)

44 School St Ste 505, Boston, MA 02108  
(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: United Corporate Services, Inc.  
3458 Lakeshore Drive  
Office Address: Tallahassee, Florida 32312  
(City) (Zip code)

**FILED**  
2023 JUL -5 AM 10:24  
SECRETARY OF STATE  
TALLAHASSEE, FL

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.*

/s/Michael A. Barr

(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.

11. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: Bruce Poon Tip

Address: 44 School Street Ste 505  
Boston MA 02108

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: Ben Perlo

Address: 44 School Street Ste 505  
Boston MA 02108

Director: Les Liddell

Address: 44 School Street Ste 505  
Boston MA 02108

**B. OFFICERS**

President: Bruce Poon Tip

Address: 44 School Street Ste 505 Boston MA 02108  
\_\_\_\_\_

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. /s/Bruce Poon Tip

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.

13. Bruce Poon Tip

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



BARBADOS

COMPANIES ACT, CAP.308

REGISTRAR'S CERTIFICATE

(Issued pursuant to S. 409 Companies Act, Cap.308)

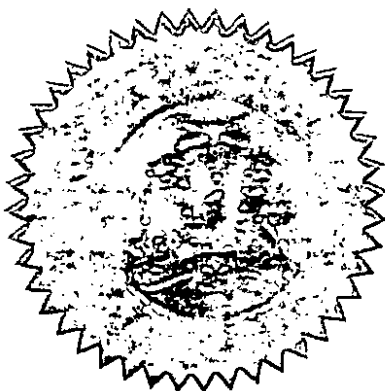
STAMP DUTY: \$16.00  
AMOUNT PAID: \$16.00  
RECEIPT NO: 696623  
DATE: 15.06.2023  
SIGNATURE: N. Mason

I, **NORMAN S. MASON**, Acting ASSISTANT REGISTRAR of the Corporate Affairs and Intellectual Property Office, Ground Floor, Baobab Tower, Warrens in the Parish of Saint Michael and in the Island of Barbados, and as such a Notary Public do hereby certify that, pursuant to the Companies Act, Cap.308 at the date of this certificate and as far as is evidenced by documents filed with the Registrar, the company:

**G ADVENTURES DEVELOPMENT INC.**  
NAME OF COMPANY

**22436**  
COMPANY NUMBER

1. Is validly existing on the Register of Companies;
2. Has paid all fees and penalties due under the Act;
3. Is not in the process of being wound-up or dissolved;
4. Has not had proceedings instituted to strike its name off the Register of Companies.



Given under my hand and  
Seal of Office as Notary Public  
of this Island this **20th day of June 2023**

*N. Mason*  
.....  
(15) ASST REGISTRAR AND AS  
SUCH A NOTARY PUBLIC IN  
AND FOR BARBADOS

[Note: The Registrar's Certificate is limited to this company's current state of compliance with the Companies Act, Cap.308 and should not be taken as a warranty or representation by the Registrar concerning the company's compliance with other laws of Barbados which the Registrar does not administer.]