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PICK-UP	☐ WAIT	MAIL
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Special Instructions to	Filing Officer:	
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COVER LETTER

	stration Sectionsion of Corpor				
SUBJECT:	AvanTech St	rategies Corporation			
JOBALCI.		Name of corpora	tion - mu	st include suffix	
Dear Sir or M	ladam:				
"Certificate o	of Existence,"	by Foreign Corporation or "Certificate of Good ! orporation to transact bu	Standing"	and check are subn	
Please return	all correspon	dence concerning this ma	atter to th	e following:	
Michael Wado	:				
		Name	of Perso	n	
AvanTech Stra	ategies Corpora	ntion			
		Firm/C	Company		
5299 Keyser F	Coad				
		A	ddress		
Hume, VA 22	639				
		City/Sta	te and Zi	p code	
mike@avante	chstrategies.coi				
	-	E-mail address; (to be us	ed for fu	ture annual report no	otification)
For further in	formation cor	ncerning this matter, plea	se call:		
Michael Wado	:	at (⁵¹³ / _{Area (}	2.	55-0485	
Nam	e of Person	Area	Code	Daytime Teleph	one Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
	heck payable to	following amount: FLORIDA DEPARTM S78.75 Filing Fee & Certificate of Status	□ \$78	STATE .75 Filing Fee & rified 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.

. . . .

	egies Corporation			
	orporation; must include "INCORPORATED, orp," "Inc." "Co," or "Corp.")	" "COMPANY," "CORPORATION	! ."	
(If name unavaila	able in Florida, enter alternate corporate name	adopted for the purpose of transacting	g business in Florida)	
Virginia	3.	85-0955037 (FEI number, if applicable)		
	y under the law of which it is incorporated)	(FEI number, if ap	plicable)	
May 5, 2020				
(Date	of incorporation)	(Date of duration, if other than perpetual)		
		· · · · · · · · · · · · · · · · · · ·		
	(SEE SECTIONS 607.1501 & 607.1)	n Florida, if prior to registration) 502, F.S., to determine penalty liabili	ty)	
5299 Keyser Rd I	Iume, VA 22639			
	(Principal off	ce street address)	-	
	(Current mailis	ng address, if different)		
		N N NOTE		
Name and stree	et address of Florida registered agent: (P.C). Box NOT acceptable)		
Name:	ZenBusiness Inc.		2021	
Tice Address:	336 E. College Ave. Suite 301		T.F.	
	Tallahassee	$\frac{32301}{\text{(Zip code)}}$	2024 FEB 12 FM 4:	
	(City)	(Zip code)	9 z m	
Registered age	ent's acceptance:			
aving been nam	ed as registered agent and to accept servi	ce of process for the above stated	l corporation at the pla	
signated in this	application, I hereby accept the appoints	nent as registered agent and agre	e to act in this capacit	
	omply with the provisions of all statutes r with and accept the obligations of my po		e perjormance of my (
,	, , , , , , , , , , , , , , , , , , , ,	emAj		
_	(Registered agent's s	ignature)		

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

under the law of which it is incorporated.

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

A. DIRECTORS Michael Wade Chairman □Chairman Name: 5299 Keyser Rd Hume, VA 22639 □ Vice Chairman □ Vice Chairman Address: ■Director □ Director President □President □ Vice President □ Vice President Treasurer □ Treasurer Secretary □ Secretary □Other _____ □Other ____ □Other _____ Name: ☐ Chairman Name: _____ □ Chairman □Vice Chairman Address: ☐ Vice Chairman Address: □Director □ Director □ President President ☐ Vice President □ Vice President □Treasurer □ Treasurer □ Secretary □ Secretary □Other _____ ☐Other_____ □Other _ _____ □Other _____ Name: _____ □ Chairman Name: □ Chairman □Vice Chairman Address: _____ □Vice Chairman Address: □ Director □Director □President □ President ☐ Vice President □Vice President ___ □ Treasurer □ Secretary □ Treasurer □ Secretary □Other _____ ☐Other _____ □Other _____ □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. 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

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 of she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in \$8.817.155, F.S.

Michael Wade / President

Commonwealth of Hirginia



State Corporation Commission

CERTIFICATE OF GOOD STANDING

1 Certify the Following from the Records of the Commission:

That AvanTech Strategies Corporation is duly incorporated under the law of the Commonwealth of Virginia;

That the corporation was incorporated on May 5, 2020;

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:

February 7, 2024

Bernard J. Logan, Clerk of the Commission