

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet  
**F2400005375**

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To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : FORSYTH & BRUGGER, P.A.  
Account Number : I20040000147  
Phone : (239)263-6000  
Fax Number : (239)263-6757

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

Email Address: \_

**SDECURTIS@AOL.COM**

**FOREIGN PROFIT/NONPROFIT CORPORATION**

SDC ADVISOR SERVICES, LTD. CO

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

RECEIVED

2024 OCT 14 PM 4:41

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

2024 OCT 14 11:37



October 14, 2024

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

FORSYTH & BRUGGER, P.A.

SUBJECT: ADC ADVISOR SERVICES, CO  
REF: W24000140472

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

The use of LIMITED or LTD. is not sufficient as a corporate designation. The name must include a word such as INCORPORATED, INC., CORPORATION or CORP.

If you have any further questions concerning your document, please call (850) 245-6051.

KYLE D BRUMBLEY  
Regulatory Specialist II Supervisor  
Registration Section

FAX Aud. #: H24000341964  
Letter Number: 324A00022669

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.

1. SDC ADVISOR SERVICES, LTD. CO

(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. DELAWARE 3. 20-5493811 (State or country under the law of which it is incorporated) (FEI number, if applicable)

4. (Date of incorporation) 5. (Date of duration, if other than perpetual)

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

7. 600 5th AVE S., STE. 207 NAPLES, FL 34102 (Principal office street address)

(Current mailing address, if different)

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

Name: JOHN N BRUGGER

Office Address: 600 5TH AVE S., STE 207

NAPLES Florida 34102 (City) (Zip code)

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.

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

A. DIRECTORS

Chairman Name: DeCurtis, Sergio A.

Vice Chairman Address: 600 5th Ave S., Ste 207

Director Naples FL 34102

President \_\_\_\_\_

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

Secretary  Treasurer

Other \_\_\_\_\_  Other \_\_\_\_\_

Chairman Name: \_\_\_\_\_

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

Director \_\_\_\_\_

President \_\_\_\_\_

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

Secretary  Treasurer

Other \_\_\_\_\_  Other \_\_\_\_\_

Chairman Name: \_\_\_\_\_

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

Director \_\_\_\_\_

President \_\_\_\_\_

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

Secretary  Treasurer

Other \_\_\_\_\_  Other \_\_\_\_\_

Chairman Name: \_\_\_\_\_

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

Director \_\_\_\_\_

President \_\_\_\_\_

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

Secretary  Treasurer

Other \_\_\_\_\_  Other \_\_\_\_\_

Chairman Name: \_\_\_\_\_

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

Director \_\_\_\_\_

President \_\_\_\_\_

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

Secretary  Treasurer

Other \_\_\_\_\_  Other \_\_\_\_\_

Chairman Name: \_\_\_\_\_

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

Director \_\_\_\_\_

President \_\_\_\_\_

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

Secretary  Treasurer

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.

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.

13. SERGIO A DeCURTIS  
 (Typed or printed name and capacity of person signing application)

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SDC ADVISOR SERVICES, LTD." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE ELEVENTH DAY OF OCTOBER, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SDC ADVISOR SERVICES, LTD." WAS INCORPORATED ON THE SEVENTH DAY OF MAY, A.D. 2015.



*JWB*  
Jeffrey W. Bullock, Secretary of State

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SR# 20243925590

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 204609844

Date: 10-11-24