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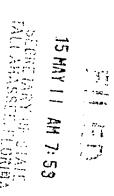
(Requestor's Name)		
(Address)		
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(Cit	y/State/Zip/Phon	e #)
•	,	,
PICK-UP	MAIT	MAIL
(Business Entity Name)		
(50	cument Number)	l
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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#### COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJE	3Advance, LLC		
GCDGL	Name of Limited Liability Company		
	losed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of the e, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida		
Please	eturn all correspondence concerning this matter to the following:		
	Sean Paul Murphy		
	Name of Person		
	3Advance, LLC		
	Firm/Company		
	303 South Jackson Street		
	Address		
Arlington, VA 22204			
	City/State and Zip Code		
paul@3advance.com			
	E-mail address: (to be used for future annual report notification)		
For fur	ner information concerning this matter, please call:		
	Denise Halter 301 685-1595		
	Name of Contact Person Area Code Daytime Telephone Number		
	MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301		
Enclo	ed is a check for the following amount:  I \$125.00 Filing Fee \$ \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate Certificate of Status Certified Copy of Status & Certified Copy		

### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. 3Advance, LLC	
(Name of Foreign Limited Liability Company; mus	t include "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpos Liability Company," "L.L.C," or "LLC.")	e of transacting business in Florida. The alternate name must include "Limited
<sub>2.</sub> Virginia	<sub>3</sub> 27-2960437
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4 05/01/2015	
(Date first transacted busin (See sections 605.0904 & 605	ess in Florida, if prior to registration.) .0905, F.S. to determine penalty liability)
5. 1001 Connecticut Ave, NW Su	uite 515
Washington, DC 20036	
· · · · · · · · · · · · · · · · · · ·	ddress of Principal Office)
<sub>6.</sub> 303 South Jackson Street	
Arlington, VA 22204	
	Mailing Address)
7. The name, title or capacity and address of the	person(s) who has/have authority to manage is/are:
Sean Paul Murphy, CEO	
303 South Jackson Street	
Arlington, VA 22204	**************************************
8. Attached is an original certificate of existence, having custody of records in the jurisdiction unde acceptable. If the certificate is in a foreign langua must be submitted)	no more than 90 days old, duly authenticated by the official er the law of which it is organized. (A photocopy is not age, a translation of the certificate under oath of the translator
(In accordance with section 605.0203, F.S., the execution of this docume	of an authorized person  nt constitutes an affirmation under the penalties of perjury that the facts stated herein are lartment of State constitutes a third degree felony as provided for in s 817.155, F.S.)

Sean Paul Murphy

Typed or printed name of signee

### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company 3Advance, LLC	is:		
If unavailable, the alternate to be used in the state of Florida is:			
2. The name and the Florida street address of the			
Christpher 1004 & Cent.	(Name)  (Name)  (Rivd  (P.O. Box NOT ACCEPTABLE)		
	FL 3 Z807 City/State/Zip		
liability company at the place designated in this registered agent and agree to act in this capacity statutes relating to the proper and complete pery accept the obligations of my position as registered Statutes.  Signature  \$ 100.00 II \$ 25.00 II	Filing Fee for Application Designation of Registered Agent		
	Certified Copy (optional) Certificate of Status (optional)		

# Commonbrealth of Hirginia



## State Corporation Commission

#### CERTIFICATE OF FACT

### I Certify the Following from the Records of the Commission:

That 3ADVANCE, LLC is duly organized as a limited liability company under the law of the Commonwealth of Virginia;

That the date of its organization is June 21, 2010; and

That the limited liability company is in existence 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:
April 29, 2015

ORATION CONTINUESSION
1903

Joel H. Peck, Clerk of the Commission