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J SHIVERS

COVER LETTER

Registration Section

TO:

Division of Co	rporations				
SUBJECT:	ne Williams	Advisor Name of Limited Liab	y Grou illty Company	p UC	-
The enclosed "Application Existence, and check are	on by Foreign Limited Liabil submitted to register the abo	lity Company for Autlove referenced foreign	norization to Trans In limited liability o	sact Business in Florida, company to transact busi	" Certificate of iness in Florida
Please return all correspo	ondence concerning this mat	ter to the following:			
	H.N. "Bo"	Boykin Name of Perso	T on		-
	Synergy	Wealth Firm/Compan	Adv,	50RS	-
	6122 Year	S Manor Address	DR		_
	TAMPA	City/State and Zip	33616 Code		_
	marilyn @ My	/Synerqya to be used for future a	dvisor. (Com lication)	-
For further information of H.N. Bo	Boykin II	e call: at (03 99 33 Code Dayti	31 - 6775 1 - 6775 me Telephone Number	_
MAILING AD Division of Cor Registration Se P.O. Box 6327 Tallahassee, FI	porations ection		STREET A Division of Registratio Clifton Bui 2661 Exec	ADDRESS: Corporations n Section	
Enclosed is a check for t			_	□ \$160.00 Filing Fee, of Status & Certified Co	

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

	NON 605,0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A ISINESS IN THE STATE OF FLORIDA:	POREIGN LIMITED LIABILIT
	ILLIAMS Advisory Group LLC ign Limited Liability Company, "L.L.C.," or	
(Name of Fore	ign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or	"LLC.")
(If name unavailable, enter all Liability Company," "L.L.C,"	ternate name adopted for the purpose of transacting business in Florida. The alternate nar	ne must include "Limited
2 State of	California 3 47-4765888	
(Jurisdiction under the law	of "LLC.") California 3. 147-4765888 of which foreign limited liability (FEI number, if applicable)
. To one	a as of this date	
4	(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	_
5. <u>1443 N</u>	EL CAMINO REAL STE A	_ _
SAN C	LEMENTE CA 92672 (Street Address of Principal Office)	_
	same as above	
6	same as above	_
	(Mailing Address)	
7. Name and street addres	s of Florida registered agent: (P.O. Box NOT acceptable)	
Name:	H.N. Boykin II	
Office Address:	H.N. Boykin II 6122 Yeats Manor Dr TAMPA , Florida 33616 (Zip code)	
	TAMPA, Florida 33616	
No. 1. 4	(City) (Zip code)	
received afens a accep	tance: gistered agent and to accept service of process for the above stated limited liab	
designated in this applica	tion, I hereby accept the appointment as registered agent and agree to act in th	his capacity. I further agree
	ons of all statutes relative to the proper and complete performance of my dutie my position as registered ag ent.	s, and I am Jamiliar with and
accept the obligations of t	ny position as registered again.	50
	(Registered agent's signature)	
	(registered agent's signature)	
8. The name, title or capa	acity and address of the person(s) who has/have authority to manage is/are:	
	see affectled list of MEMBERS	N
		5
		Later Catty
Attached is a certificate	of existence, no more than 90 days old, duly authenticated by the official having	custody of records in the
jurisdiction under the law of the translator must be so	of which it is organized. (If the certificate is in a foreign language, a translation	of the certificate under oath
<	2016	
	Signature of an authorized person	
This document is sure		ny falsa information
submitted in a document to	d in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that a o the Department of State constitutes a third degree felony as provided for in s.81	7.155, F.S.
	H. N. Bovkin II	
	Typed or printed name of signee	

THE WILLIAMS ADVISORY GROUP (TWAG)

Roy Williams
Diana Williams (spouse)
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San Clemente, CA 92672
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Phone: 530. 273.4097 Sue

sue.staker@gmail.com

Amy Aubre Castoro Irimi Group 9 Douglas Drive

Princeton Junction, NJ 08550

Phone: 609.275.7199 amyzcastoro@gmail.com 15 OCT -2 PH 12: 53

State of California

Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME: THE WILLIAMS ADVISORY GROUP, LLC

FILE NUMBER:

201521010321

FORMATION DATE:

07/27/2015

TYPE:

DOMESTIC LIMITED LIABILITY COMPANY

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF. I execute this certificate and affix the Great Seal of the State of California this day of September 21, 2015.

> ALEX PADILLA Secretary of State