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(((H17000140176 3)))



H170001401783ABC

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : INCORP SERVICES INC

Account Number : I20120000007 Phone : (702)866-2500 Fax Number : (702)866-2689

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

Email Address: documents Qincorp.com

Foreign Limited Liability Company Averill Fundraising Solutions LLC

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COVER LETTER

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TO:	Registration Section
	Division of Corporations

ואום	sion of Corporation	18				
SUBJECT:	Averill Fundraisir	ng Solutions LLC	•			
		Name of Limited Liability Company				
The enclosed Existence, an	"Application by For d check are submitted	eign Limited Liability Compr d to register the above referen	my for Authoriza	tion to Tra ed liability	nsact Business in Florida," Certifica company to transact business in Flo	ite of orida
Please return	all correspondence c	oncerning this matter to the f	ollowing:			
	Danielle Little	ejohn				
	 -	Na	me of Person			
	InCorp Services, Inc.					
	Firm/Company					
·	3773 Howard Hughes Pkwy, Ste 500S					
			Address		•	
	Las Vegas, N	√V 89169	The state of the s			
	<u></u>	City/St	ate and Zip Code			
	Documents@i	incorp.com				
	<u> </u>	E-mail address: (to be used	for future annual	report not	ification)	
For further in	nformation concerning	g this matter, please call:				
Da	nielle Littlejohn fo	r InCorp Services, Inc.	800 at (866-2		
	Name o	f Contact Person	Area Code	Day	time Telephone Number	
Div Reg P.O	ILING ADDRESS: ision of Corporations istration Section . Box 6327 ahassee, FL 32314			Division Registrati Clifton B 2661 Exc	ADDRESS: of Corporations ion Section uilding cutive Center Circle ee, FL 32301	
	check for the follow 125.00 Filing Fee	ing amount: ☐ \$130.00 Filing Fee & Certificate of Status	■ \$155,00 Fillin Certified Copy	ng Fee &	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy	

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(((H17000140176 3)))

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA ((H17000140176 3)))

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.} Averill	Fundraising S	Solutions LLC		
	(Name of Foreign	Limited Liability Company; must include "Limited	Liability Company," "L.L.C.," or "LLC.")	
(If name man)	ilable, enter alternate n	ame adopted for the purpose of transacting business in Flor	ids. The alternate name must include "Limited Lis	hiliny Company." "L.1.C." or "1.1C.")
2 New Je			4	
		nch foreign limited liability company is organized)	J(FEI mum)	er, if applicable)
4. Upon	Registration		}	
		Date first transacted business in Florida, if prior to r (See sections 605.0904 & 605.0903, F.S. to determine	egistration.) ne penalty liability)	
5. 64 Ma	ple Ave.	•		01
J	(Street Address of F	rincipal Office)	6. 680 5th Ave., Suite 220	7535)
Morris	town, NJ 0796	50	New York, NY 10019	e de la companya de l
				ယ္
7. Name a	and street address	s of Florida registered agent; (P.O. Box	NOT acceptable)	<u>့)</u> က
1	Vame:	inCorp Services, Inc.		·,,
a	ffice Address:	17888 67th Court North		
		Loxahatchee	Florida 33470	
	l agent's accep	(City)	Florida 33470 (Zip cod	e)
designated to comply	l in this applicat with the provisi	gistered agent and to accept service of p tion, I hereby accept the appointment as ons of all statutes relative to the proper a of my position as registered agent.	registered agent and agree to act and complete performance of my	in this capacity. I further agre
		(Registered agent's s	ipanture)	
8. The na	me, title or capa	city and address of the person(s) who has	s/have authority to manage is/are:	
Title o	or Capacity:	Name and Address:	Title or Canacity:	Name and Address:
Mem	ber	Robert C. Happy Jr.	Member	Glenn Bernius
		680 5th Ave., Suite 2201 New York, NY 10019		680 5th Ave., Suite 2201 New York, NY 10019
Mem	ber .	Chad D. Peddicord		
	·	880 5th Ave., Suite 2201 New York, NY 10019	· 	
Also ottor	hmento if necess		•	<u></u>
(Use attac	hments if necess	airy)		
jurisdiction		of existence, no more than 90 days old, do f which it is organized. (If the certificate abmitted) AMM Signaphre	is in a foreign language, a translati	
		Signapare o	of an authorized person	
		ated in accordance with section 605.0203 the Department of State constitutes a thin		
		•	. Нарру Jr.	·

(((H17000140176 3)))

Typed or printed name of signee

STATE OF NEW JERSEY ((H17000140176 3))) DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

AVERILL FUNDRAISING SOLUTIONS LLC 0600391554

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on October 04, 2012.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and office are:

ROBERT D FRAWLEY 64 MAPLE AVENUE MORRISTOWN, NJ 07960-0000



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 17th day of May, 2017

July March

Ford M. Scudder Acting State Treasurer

Certificate Number: 6079824322

Verify this certificate online at

https://www.i.state.nj.us/TYTR_StandingCert/JSP/Yerify_Cert.jsp