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Florida Department of State  
Division of Corporations  
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Division of Corporations  
File Number: 13022694705

Original Name: HARVARD BUSINESS SERVICES, INC.  
Document Number: 13022694705  
State: FL  
File Number: 13022694705

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Mail Address: [derek@xstrats.com](mailto:derek@xstrats.com)

Foreign Limited Liability Company  
Andrea Banks LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
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2021 NOV 24 PM 2:42  
TALLAHASSEE, FL  
CLERK OF SUPERIOR COURT

2021 NOV 24 AM 11:45  
TALLAHASSEE, FLORIDA  
CLERK OF SUPERIOR COURT

S. ROBERTS

NOV 24 2021

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

IN COMPLIANCE WITH SECTION 605.002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Andrea Hanks LLC  
(Name of Foreign Limited Liability Company, must include "Limited Liability Company," "LLC," or "L.L.C.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C." or "LLC.")

2. Delaware 3. 87-2211154  
(Jurisdiction under the law of which foreign limited liability company is organized) (FID number, if applicable)

4. 11-23-2021  
(Date first transacted business in Florida, if prior to registration)  
(See sections 605.0901 & 605.0905, F.S., to determine penalty liability)

5. 340 Royal Poinciana Way, ST 317-164 6. 340 Royal Poinciana Way, ST 317-164  
(Street Address of Principal Office) (Mailing Address)  
Palm Beach, FL 33480 Palm Beach, FL 33480

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

Name: Derek Utley  
Office Address: 340 Royal Poinciana Way, ST 317-164  
Palm Beach 33480  
City, Florida Zip code

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2021 NOV 24 PM 2:42  
STATE OF FLORIDA  
TALLAHASSEE, FL

## Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company 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)

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8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage (up to six (6) total):

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input type="checkbox"/> Manager	Name: Alexander Bruesewitz	<input type="checkbox"/> Manager	Name: Andrea Hanks
<input checked="" type="checkbox"/> Member	Address: 340 Royal Poinciana Way	<input checked="" type="checkbox"/> Member	Address: 231 Still Water
<input type="checkbox"/> Authorized	ST 317-164	<input type="checkbox"/> Authorized	Huntingtown, MD, 20639
Person	Palm Beach, FL 33480	Person	
<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other
<input type="checkbox"/> Manager	Name: Derek Utley	<input type="checkbox"/> Manager	Name:
<input checked="" type="checkbox"/> Member	Address: 340 Royal Poinciana Way	<input type="checkbox"/> Member	Address:
<input type="checkbox"/> Authorized	ST 317-164	<input type="checkbox"/> Authorized	
Person	Palm Beach, FL 33480	Person	
<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other
<input type="checkbox"/> Manager	Name:	<input type="checkbox"/> Manager	Name:
<input type="checkbox"/> Member	Address:	<input type="checkbox"/> Member	Address:
<input type="checkbox"/> Authorized		<input type="checkbox"/> Authorized	
Person		Person	
<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> 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.

9. 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 which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any 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.



Signature of an authorized person

Derek Utley

Typed or printed name of signer

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# Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ANDREA HANKS LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FOURTH DAY OF NOVEMBER, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ANDREA HANKS LLC" WAS FORMED ON THE SEVENTEENTH DAY OF AUGUST, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.



6172019 8300

SR# 20213893630

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

Authentication: 204785849

Date: 11-24-21

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