1/12/23, 10:50 AM Division of Corporations

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From:

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Fax Number

: (614)573-3996

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Email Address: accounting@avadcap.com

Foreign Limited Liability Company

AVAD People LLC

Certificate of Status	Ů
Certified Copy	1
Page Count	04
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Help'S. ROBERTS

FEB 13 2023

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

AVAD People LLC						
(Name of Foreign	Limited Liability Company must include "Limited L	iability Company," T.T. C.," or "T.T.C.")				
(II) amo unuvariable, enter attemate r	some adopted to the perpose of transacting business in Flori	ta The afternate name must include "Lamited Liabil	ds Company," "I	LC." or "D	C . t	
Texas		88-4299767				
2. (Jurisdiction under the law of which foreign limited limiting company, is organized)		3. (Fill number, if applicable)				
12/29/2022						
	Date first transacted business in Popula of prior to registere sections 695 6903 & 605,0903, P.S. to determine	oction () penalty hability (·			
12655 N. Central Expy., Ste. 925		12655 N. Central Expy., Ste. 925				
5. (Street Address of Principal Office)		(Mading Address)				
Dallas, TX 75243		Dallas, TX 75243				
				2023		
7. Name and <u>street address</u> of Florida registered agent. (P.O. Box. N		IOTi acceptable)		منذ		
<u></u>				?	•	
	CT Corporation System			1		
Name:				ڢ		
Office Address:	1200 South Pine Island Rd.			25		
	Plantation	33324				
	(City)	. Florida	_			
Registered agent's accep						

C T Corporation System by Kaity Toon, Asst Sec 1

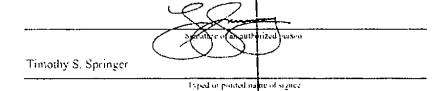
(Registered agent's signature)

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]:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
■Manager	Name: Timothy S. Springer	□ Manager	Name, Jarrett B. Reed
□Member	Address:12655 N. Central Expy., Ste. 92	■ Member	6947 Coronado Avenue Address:
□Authorized	Dallas, TX 75243	□ Authorized	Dallas, TX 75214
Person		Person	
	Other	_Other	
□Manager	Name:	□Manager	Name:
□Member	Address:	Member	Address.
□Authorized		Authorized	
Person		Person	
□Other		(hher	□ □ Other,
□Manager	Name:	Manager	Name:
□Member	Address:	Member	Address:
∃Authorized		Authorized	
Person		Person	
Other	Other	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.

- 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) (1), 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 \$817.155, F.S.



To:

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Jane Nelson Secretary of State

Office of the Secretary of State

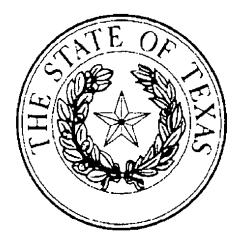
Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document. Certificate of Formation for Avad People LLC (file number 804749B89), a Domestic Limited Liability Company (LLC), was filed in this office on September 28, 2022

It is further certified that the entity status in Texas is in existence.

Delayed Effective date: September 30, 2022

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on February 03, 2023.



Phone: (512) 463-5555

Prepared by: SOS-WEB

gave Hebran

Jane Nelson Secretary of State

Come visit us on the internet at https://www.sos.texas.gev-Fax: (512) 463-5709

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