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TO DISK US TO WANT TO MAKE
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Dopies Certificates of Status
Lopies Certificates of Status
instructions to Filing Officer

Office Use Only



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112

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 587404 8264404

AUTHORIZATION :

COST LIMIT: \$ 2500.00 Take Any tess

50 Nacy in the late

ORDER DATE: March 15, 2023

ORDER TIME : 4:37 PM

ORDER NO. : 587404-120

CUSTOMER NO: 8264404

FOREIGN FILINGS

NAME: ADVANTIS GLOBAL, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland-sorenson -- EXT#

EXAMINER:

COVER LETTER

TO: Registration Section

Name of Limited Liability Company						
		Company for Authorization to Transact Business in Florida,' referenced foreign limited liability company to transact busin				
eturn a	ll correspondence concerning this matter t	o the following:				
	Alyssandra Russo					
		Name of Person				
	Advantis Global, LLC					
Firm/Company						
	20 Sunnyside Avenue, Suite E					
Address						
	Mill Valley, CA 94941					
	C	ity/State and Zip Code				
	sos@advantisglobal.com					
	E-mail address: (to be	used for future annual report notification)				
her infò	ormation concerning this matter, please ca	1:				
Alyss	sandra Russo	408 309-8767				
	Name of Contact Person	Area Code Daytime Telephone Number				
	ng Address:	Street Address:				
Registration Section Division of Corporations		Registration Section Division of Corporations				
P.O. Box 6327		The Centre of Tallahassee				
Talla	thassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				

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

IN COMPLANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

it tame marvarance, enter anchane	name adopted for the purpose of transacting business in Fl	orida. The alternate nam	must include "Limited Liability Con	mpany.""L.L.C." or "L.L.C		
California		20-8421792 3.				
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	(FEI number, if applicable)				
02/27/2012						
	(Date first transacted business in Florida, if prior to registration.) (See sections 605 0904 & 605,0905, F.S. to determine penalty liability)					
20 Sunnyside Avenu		20 Sunnyside Avenue 6.				
Street Address of Principal Office)		(Maili	ng Address)	r-:		
Suite E		Suite E				
Mill Valley, CA 9494	1	Mill Valle	 1			
7. Name and street address	ss of Florida registered agent: (P.O. Box	NOT acceptable)	=======================================		
Name:	Corporation Service Company			•		
Office Address:	1201 Hays Street					
	Tallahassee	. F	32301 lorida			

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.

and accept the obligations of my position as registered agent.

Corporation Service Company

By: Wilay Jranson, AVP

(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: Title or Capacity: Name and Address: Name and Address: Alyssandra Russo Shaun Porter □Manager □Manager 20 Sunnyside Ave 20 Sunnyside Ave □Member □Member Suite E Suite E Authorized ■Authorized Mill Valley, CA 94941 Mill Valley, CA 94941 Person Person □Other____ □Other____ □Other____ □Other_ Name: Sabrina Bennett □Manager □Manager Name: _____ 20 Sunnyside Ave □ Member □Member Address: _____ Suite E □ Authorized ☐ Authorized Mill Valley, CA 94941 Person Person □Other____ Other____ Other □Other____ Name: ______ Name: □Manager □Manager Address: □Member □Member □Authorized □ Authorized Person Person □Other_____ □Other_____ □Other____ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed 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. Alyssandra Russo
Signature of an authorized person

Typed or printed name of signee

Alyssandra Russo



I, SHIRLEY N. WEBER, Ph.D., California Secretary of State, hereby certify:

Entity Name: ADVANTIS GLOBAL, LLC

 Entity No.:
 2969856

 Registration Date:
 02/15/2007

Entity Type: Limited Liability Company - CA

Formed In: CALIFORNIA

Status: Active

The above referenced entity is active on the Secretary of State's records and is authorized to exercise all its powers, rights and privileges in California.

This certificate relates to the status of the entity on the Secretary of State's records as of the date of this certificate and does not reflect documents that are pending review or other events that may impact status.

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

CALIFORNAL CALIFORNAL

IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of March 15, 2023.

SHIRLEY N. WEBER, PH.D.

Secretary of State

Certificate No.: 091504120

To verify the issuance of this Certificate, use the Certificate No. above with the Secretary of State Certification Verification Search available at **biz**fileOnline.sos.ca.gov.