

Florida Department of State

Division of Corporations

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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : LEGALZOOM.COM INC.
Account Number : 120010000062
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SECRETARY OF STATE
TALLAHASSEE, FL

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

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FLORIDA PROFIT/NON PROFIT CORPORATION

Advanced Solutions for Rare Disease Inc.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

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STATE
TALLAHASSEE, FL

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COVER LETTER

Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: Advanced Solutions for Rare Disease Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☒ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: Erik Treutlein, LegalZoom.com, Inc.
Name (Printed or typed)

9900 Spectrum Dr.

Address

Austin, TX 78717

City, State & Zip

323-962-8600 ext. 9724

Daytime Telephone number

ramanagement@legalzoom.com

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

2024 SEP 25 PM 3:18
DIVISION OF CORPORATIONS
STATE OF FLORIDA

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: Advanced Solutions for Rare Disease Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address Mailing address, if different is:
1100 Holland Dr
Boca Raton, FL 33487

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Recruitment

ARTICLE IV SHARES

The number of shares of stock is: 110

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	Colby Kash (P,T,S)	Name and Title:	Peter Kash (D)
Address	1100 Holland Dr Boca Raton, FL 33487	Address:	1100 Holland Dr Boca Raton, FL 33487
Name and Title:		Name and Title:	
Address		Address:	
Name and Title:		Name and Title:	
Address		Address:	

2024 SEP 25 PM 3:18
STATE OF FL
D

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name:

United States Corporation Agents, Inc.

Address:

476 Riverside Ave.

1 Jacksonville, FL 32202

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name:

Colby Kash

Address:

1100 Holland Dr

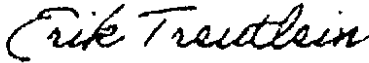
Boca Raton, FL 33487

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity




Required Signature/Registered Agent

09/24/2024

Date

Colby Kash
I submit this document and affirm that the facts stated herein are true. I am aware that the 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.



Required Signature/Incorporator

09/24/2024

Date

Colby Kash