F09000001249

(Requestor's Name)				
(Address)				
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(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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UU9-16063				

Office Use Only

No COT



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2009 MAR -4 PH 4: 42

ACCRETAGE OF STATE
FLORIDA

03/02/09--01031--023 **78.75

COVER LETTER

TO: New Filing Section Division of Corporations			
SUBJECT: CheckedProfile.Org	nc		
	orporation	- must include suffix)
Dear Sir or Madam:			
The enclosed "Application by Foreign Corpora "Certificate of Existence," and check are submarransact business in Florida.			
Please return all correspondence concerning th	is matter to	the following:	
Ben Way			
	Name of P	erson)	
CheckedProfile.Org			
	Firm/Com	pany)	
401 E. Las Olas Blvd. Suite 140			
Et Laudandala Flacida 20004	(Addres	ss)	
Ft. Lauderdale, Florida 33301			
(Cı	ty/State an	d Zip code)	
For further information concerning this matter,	, please cal	l:	
Ben Way	954	7907580	
(Name of Person)	(Area Code & Daytime Telephone Number)		
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Enclosed is a check for the following amount:			
\$70.00 Filing Fee 78.75 Filing Fee Certificate of Sta		78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy



RECEIVED DEPARTMENT OF STATE

09 MAR 12 PM 1:03

FLORIDA DEPARTMENT OF STATE Division of Corporations

March 3, 2009

BEN WAY 401 E LAS OLAS BLVD STE 1400 FT LAUDERDALE, FL 33301

SUBJECT: CHECKEDPROFILE.ORG INCORPORATED

Ref. Number: W09000010063

We have received your document for CHECKEDPROFILE.ORG INCORPORATED and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please complete the date of incorporation in number 4 of the application.,

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6928.

Tim Burch Regulatory Specialist II

Letter Number: 109A00007342

Division of Comparations DO ROY 6997 Tallahassas Florida 99914



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 16, 2009

BEN WAY 401 E LAS OLAS BLVD STE 1400 FT LAUDERDALE, FL 33301

SUBJECT: CHECKEDPROFILE.ORG INCORPORATED

Ref. Number: W09000010063

We have received your document for CHECKEDPROFILE.ORG INCORPORATED and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper, that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6928.

Tim Burch Regulatory Specialist II

Letter Number: 409A00008787

DEPARTHENT OF STAT

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO

REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. CheckedProfile.Org Incorporated (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) , DELEWARE (FEI number, if applicable) (State or country under the law of which it is incorporated) JANUARY 20095. PERPETUAL (Duration: Year corp. will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7 401 E. Las Olas Blvd. Suite 1400, Ft. Lauderdale, Florida 33301 (Principal office address) 401 E. Las Olas Blvd. Suite 1400, Ft. Lauderdale, Florida 33301 (Current mailing address) 8. INTERNET BASED BUSINESS

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

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

Name:

Ben Way

Office Address:

401 E. Las Olas Blvd. Suite 1400

Ft. Lauderdale

Florida 33301

(City)

(Zip code)

10. Registered agent's acceptance:

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

^{11.} Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Ben Way Address: 401 E. Las Olas Blvd. Suite 1400, Ft. Lauderdale, Florida 33301 Vice Chairman: _____ Address: _ Address: __ Address: __ **B. OFFICERS** President: __ Address: __ Vice President: Address: __ Secretary: _ Address: _ Treasurer: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Director or Officer listed in number 12 of the application) BEN

(Typed or printed name and capacity of person signing application)

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "CHECKEDPROFILE.ORG, INC." IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN

GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE

RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTIETH DAY OF MARCH,

A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID

"CHECKEDPROFILE.ORG, INC." WAS INCORPORATED ON THE TWENTIETH DAY

OF JANUARY, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES
HAVE NOT BEEN ASSESSED TO DATE.

2009 MAR -4 PN 4: 42
SECRETARY OF STATE
TALL ALLASSEF FLORIDA

4646342 8300

090286600

AUTHENTY CATION: 7199166

DATE: 03-20-09

You may verify this certificate online at corp.delaware.gov/authver.shtml