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CT Corporation System 660 East Jefferson Street Tallahassee, FL 32301 Tel 850 222 1092 Fax 850 222 7615 Attn: Jeff Netherton

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Name Availability Document Examiner	07/25/00		
Updater Verifier Acknowledgement W.P. Verifier	DEPARTACHT OF STATE THUISION OF CORPORATIONS TALLAHASSEE, PLORIDA TALLAHASSEE, PLORIDA	- .	

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FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

July 25, 2000

C T CORPORATION SYSTEM

TALLAHASSEE, FL

SUBJECT: LIBERATOR PRODUCTIONS, INC.

Ref. Number: W00000018551

We have received your document for LIBERATOR PRODUCTIONS, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We cannot accept the CERTIFIED COPY of you. Articles of Incorporation.

The law requires that you provide us with a CERTIFICATE OF EXISTENCE. This is a 1-page certificate issued by the Oklahoma Secretary of State. It will state that your corporation is filed and that it hasn't been dissolved. We must have a original certificate -- i.e. not a photocopy -- dated within the past 90 days.

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) 487-6914.

Buck Kohr Corporate Specialist

Letter Number: 800A00040561

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Please back-date

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSAB

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. Liberator Productions, Inc. (Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.) (State or country under the law of which it is incorporated) (FEI number, if applicable) (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) (Current mailing address) 8. Any lawful or activity (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 or Mail Drop Box NOT acceptable) Name: <u>CT Corporation System</u> Office Address: 1200 South Pine Island Road 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.

12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

which it is incorporated.

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

A. DIRECTORS (Street address only - P.O. Box NOT acceptable) Chairman: Address: __ Vice Chairman: Address: _ Director: Robert G. Tilton 1521 Alton Road Address: ___ PMB 371 - - - - - Miami, FL 33139 Director: _ Address: __ B. OFFICERS (Street address only - P.O. Box NOT acceptable) President: Robert G. Tilton Address: ___ 1521 Alton Road PMB 371 Miami, FL 33139 Vice President: __Dan Moroso Address: 1521 Alton Road PMB 371 <u>Miami, FL 33139</u> Secretary: Barbara Miller Address: 2009 South 89th East Avenue Tulsa, OK 74129 Treasurer: Barbara Miller Address: 2009 South 89th East Avenue Tulsa, OK 74129 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) BARBARA Miller

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

