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TRANSMITTAL LETTER						
TO: Registration Sec Division of Corp						
SUBJECT: FIN	(Name of	corporation	- musi include suffix	UR)	6 5 .2	INC
Dear Sir or Madam:						
The enclosed "Applicating "Certificate of Existence transact husiness in Flori	", and check are sub	nation for A mitted to rep	uthorization to Transgister the above refere	act ku meel t	siness in foreign c	Florida", exporation to
Please return all correspo	ndence concerning	this matter t	o the following:			
TT	GRAHAM	(Name of F	Person)		<u> </u>	·
		(Firm/Com	pany)			
2943	GULE	Z B	AY Biv	2	#	310
_ 2963 _ CLEARW	ATER 1	FL.	d Zip code)		337	159_
For further information of	oncerning this matte	er, plcase cal	II:			
Name of Person	n) at	(717 (Area Co	ode & Daytime Telep	711 home N	Jumber)	
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399	:		MAILING ADDRESS Registration Section Division of Corporati P.O. Box 6327 Tallahassee, FL 323	lons		
Enclosed is a check for t	he following amount	::				
□ \$70.00 Filing Fce	☐ \$78.75 Filing Fe Certificate of S		\$78.75 Filing Fee & Certified Copy	ß	Certific	Filing Fee, cate of Status & ed Copy



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

June 11, 2004

JT GRAHAM 2963 GULF 2 BAY BLVD., #310 CLEARWATER, FL 33759

SUBJECT: FINANCIAL FREEDOM RESOURCES INC.

Ref. Number: W04000022707

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

The document must have original signatures.

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 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) 245-6967.

Letter Number: 404A00039737

Michelle Hodges Document Specialist

Division of Cornerations - P.O. BOX 6327 - Tallahassee, Florida 32314

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. 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) (State or country under the law of which it is incorporated) (Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.") (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) (Current mailing address) 9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) 2692 WEST VINA DEL MAR BLUD.

ST. PETERSBURG BEACH, Florida 33706
(City) (Zin 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.

- 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
Chàirman:
Address:
Vice Chairman:
Address:
Director:
Address:
Addiess.
Director:
Address:
B. OFFICERS
President: Robert Sandifer
Address: One Commerce Center 1201 N. Orange Street Suite 723
Wilmington, DE 19801
Vice President:
Address:
Secretary:
Address:
Treasurer:
Address:
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)
Robert Sandifer/ Acting president
(Typed or printed name and capacity of person signing application)

Delaware

PAGE :

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FINANCIAL FREEDOM RESOURCES, 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 THIRTEENTH DAY OF APRIL, A.D. 2004.



Warriet Smith Windson, Secretary of State

AUTHENTICATION: 3048242

DATE: 04-13-04