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· (Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATI

COVER LETTER

TO: New Filing Section Division of Corporations					
SUBJECT: The JC Group, In	с.				
(Name of corpo	ration - must include suffix)				
Dear Sir or Madam:	•				
The enclosed "Application by Foreign Corporation "Certificate of Existence," and check are submitted transact business in Florida.	for Authorization to Transact Business in Florida," to register the above referenced foreign corporation to				
Please return all correspondence concerning this ma	atter to the following:				
John Frederiksen					
(Nam	e of Person)				
The SC Group, Inc					
John Frederiksen (Name of Person) The JC Group, Inc P.O. Box (Firm/Company)					
2123					
·	Address)				
Melbourne, FL 329	02				
(City/St	ate and Zip code)				
For further information concerning this matter, plea	se call:				
John Frederikson at (3)	rea Code & Daytime Telephone Number)				
(Name of Person) (A	rea Code & Daytime Telephone Number)				
STREET/COURIER ADDRESS: New Filing Section MAILING ADDRESS: New Filing Section					
Division of Corporations Division of Corporations					
Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, FL 32314				
Tallahassee, FL 32301					
Enclosed is a check for the following amount:					
\$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Sertified Copy \$87.50 Filing Fee, Certificate of Status & Certified Copy				



RECEIVED

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THE REPLA

FLORIDA DEPARTMENT OF STATEOF! Division of Corporations

DIVIS

June 20, 2006

JOHN FREDERIKSEN PO BOX 2123 MELBOURNE, FL 32902

SUBJECT: SENIOR SCENE MAGAZINE, INC.

Ref. Number: W06000028022

We have received your document for SENIOR SCENE MAGAZINE, 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):

The name and title of the person signing the document must be noted beneath or opposite the signature.

Please list the Federal Employer Identification number in the appropriate section of the application. If applied for, enter "applied for", or if not applicable, enter "N/A".

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 Document Specialist

Letter Number: 806A00041385

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.

1. The J	C Group, Inc								
(Enter name of co	orporation; must include "INCORPORAT orp," "Inc," "Co," or "Corp.")	ľED,"	"COMPANY	," "CORPO	DRATION,"				
Senio	r Scene Magazine	, I.	nc.						
(If name unavaila	able in Florida, enter alternate corporate n	ame a	dopted for the	purpose of	transacting bu	siness in	Florida)		
2. Mississ	under the law of which it is incorporated)	3,	64-0	8866	13				
(State or country	under the law of which it is incorporated)	_		(FEI numb	er, if applicab	le)			
4. Oct 1.	of incorporation)	5.	2	096					
(Date	of incorporation)	-	(Duration: Yo	ear corp. wi	ll cease to exis	t or "per	rpetual")	'	
6. <u>//</u>	4								
	(Date first transacted busin (SEE SECTIONS 607.1501 & 60	ess in 07.15	Florida, if price 02, F.S., to dete	or to registra ermine pena	ition) lty liability)				
7. <u>1835</u>	Charlesmonte Dr. Ste. (Principal office		Indi	alun ti	c,FL	32	903		
P.O. Bu	(Principal office	addr	ess)						
2123	, Melbourne, FL (Current mailing	32	902				<u>₽</u> :	2006 JUN	
	(Current mailing	g addr	ess)			- - -	上 型	ي	77
8. Publist	ner						SECRETARY OF STATE	N 28	FILED
(Purpose(s	of corporation authorized in home state	or co	untry to be carr	ried out in s	ate of Florida)	그들목	<u></u>	Ö
9. Name and stree	et address of Florida registered agent:	(P.O	. Box <u>NOT</u> a				TORII TATS	1:41	
Name:	John Frederiksen 1835 Charles mite Dr						A	\$	
Office Address:	1835 Charles mite Dr	. 5	KeC						
	Indialatic FL 37	& -	, Florida	329	03				
	(City)			(Zip cod	e)				

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:	
Address:	
Vice Chairman:	
Address:	2006 SECH TALL
	(O
Director:	
Address:	F STA 4:
	4: 42 TATE ORIDA
Director:	
Address:	
B. OFFICERS	
President: John Frederiksen	
Address: 1835 Charles unte Dr, She C	
Indialmtic, FL 32903	
Vice President: Charlotte Frederiksen	
Address: 1835 Charlesnute Dr. Ste. C	
Indialnetic, FL 32903	
Secretary:	
Address:	
Treasurer:	,
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additio	nal officers and/or directors
13. (Signature of Director or Officer listed in number 12 of the appropriate to the second se	oplication)
14. John Frederiksen, President	
(Typed or printed name and capacity of person signing appl	lication)

State of Mississippi

Office of the Secretary of State Eric Clark, Secretary of State Jackson, Mississippi SECRETARY OF STATE TALLAHASSEE, FLORIDA

CERTIFICATE

I, ERIC CLARK, Secretary of State of the State of Mississippi, and as such, the legal custodian of the corporate records, required by the laws of Mississippi, to be filed in my office, do hereby certify:

That on October 1, 1997, the State of Mississippi issued a Charter/Certificate of Authority to:

THE JC GROUP, INC.

That the state of incorporation is MISSISSIPPI.

That the period of duration is 99 years.

That according to the records of this office, Articles of Dissolution or a Certificate of Withdrawal have not been filed.

That according to the records of this office, a current Annual Report has been delivered to the Office of the Secretary of State.

I further certify that all fees, taxes and penalties owed to this state, as reflected in the records of the Secretary of State, have been paid and that the corporation is in existence or has authority to transact business in Mississippi.

Given under my hand and seal of office June 9, 2006

Tric Clark

ERIC CLARK Secretary of State

Certification Number: 8027125-1 Page 1 of 1 Reference: john frederiksen/fs Verify this certificate online at http://www.sos.state.ms.us/busserv/corp/verify