

F07000005678

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2007 NOV 16 AM 9:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Florida Management, Inc
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Daphne Yvonne Tyson
(Name of Person)
Florida Management Inc
(Firm/Company)
4414 Morgan Lane,
(Address)
Davie FL 33328
(City/State and Zip code)

For further information concerning this matter, please call:

Daphne Yvonne Tyson (Name of Person) (954) 717-8732
(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 Status ☐ \$78.75 Filing Fee & Certified Copy ☒ \$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 16, 2007

DAPHE YVONNE TYSON
FLORIDA MANAGEMENT INC
4414 MORGAN LANE
DAVIE, FL 33328

SUBJECT: FLORIDA MANAGEMENT & CONSULTANTS, INC.
Ref. Number: W07000056364

We have received your document for FLORIDA MANAGEMENT & CONSULTANTS, 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 of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is V55941 - FLORIDA MANAGEMENT CONSULTANTS, P.A..

Please return 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) 245-6934.

Loria Poole
Regulatory Specialist II

Letter Number: 507A00066155

**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.*

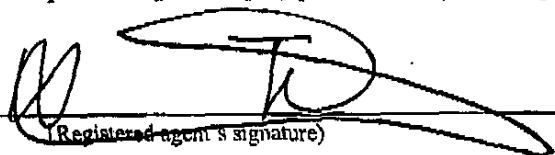
1. Florida Management, Inc
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- Florida Management & Consultant Group, Inc
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. WY 3. 33-1108064
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 12/5/05 5. _____
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. 11/16/2007
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 4414 Morgan Ln Davie, FL 33328
(Principal office address)
- _____
(Current mailing address)
8. _____
(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: Daphne Yvonne Tynon
- Office Address: 4414 Morgan Ln
Davie, Florida 33328
(City) (Zip code)

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TALLAHASSEE, FLORIDA

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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: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Daphne Yvonne Tyson

Address: 4414 Morgan Lane

Davie FL 33328

Vice President: Daphne Yvonne Tyson

Address: 4414 Morgan Lane

Davie FL 33328

Secretary: Daphne Yvonne Tyson

Address: 4414 Morgan Lane, Davie FL 33328

Treasurer: Daphne Yvonne Tyson.

Address: 4414 Morgan Lane, Davie FL 33328

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 

(Signature of Director or Officer listed in number 12 of the application)

14. Daphne Yvonne Tyson

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

STATE OF WYOMING
Office of the Secretary of State

I, MAX MAXFIELD, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

Florida Management, Inc.

is a


Profit Corporation

formed or qualified under the laws of Wyoming did on **December 5, 2005**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2005-000503771**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 12th day of October, 2007 at 11:10 AM. This certificate is assigned 001931419.




Secretary of State