

FO8000002982

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

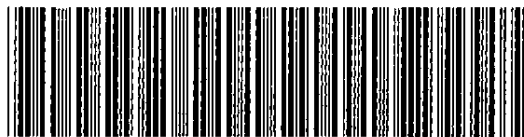
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06/25/08--01018--012 **70.00

SECRETARY OF STATE
TOLSON, MISSOURI

08 JUN 25 PM 3:17

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7/31
W08-30471
6/25



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 25, 2008

ROBERT HUDELSON
12175 NE 19TH AVE #4
MIAMI, FL 33181

SUBJECT: A LIVE ANSWER, INC
Ref. Number: W08000030671

We have received your document for A LIVE ANSWER, INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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) 245-6955.

Suzanne Hawkes
Regulatory Specialist II

Letter Number: 308A00038338

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: A Live Answer, 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:

Robert Hudelson

(Name of Person)

A Live Answer, Inc

(Firm/Company)

12175 NE 19th Ave, # 4

(Address)

Miami FL 33181

(City/State and Zip code)

For further information concerning this matter, please call:

Robert Hudelson

(Name of Person)

at (786) 863-8904

(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

**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. **A Live Answer, Inc**

(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)

2. **Delaware**

(State or country under the law of which it is incorporated)

3. _____

(FEI number, if applicable)

4. **4-11-08**

(Date of incorporation)

5. **perpetual**

(Duration: Year corp. will cease to exist or "perpetual")

6. **none**

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. **1755 Cumberland Drive, Harrisonburg VA 22801**

(Principal office address)

12175 NE 19th Ave, # 4 Miami FL 33181

(Current mailing address)

8. **2nd office location - billing purposes**

(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: **Robert Hudelson**

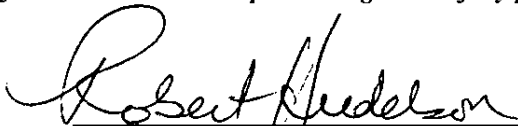
Office Address: **12175 NE 19th Ave, # 4**

Miami, Florida **33181**
(City) (Zip code)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: Chris Moschella

Address: 1755 Cumberland Drive, Harrisonburg VA 22801

Vice Chairman: Robert Hudelson

Address: 12175 NE 19th Ave, # 4 Miami FL 33181

Director: Chris Moschella

Address: 1755 Cumberland Drive, Harrisonburg VA 22801

Director: Robert Hudelson

Address: 12175 NE 19th Ave, # 4 Miami FL 33181

B. OFFICERS

President: Chris Moschella

Address: 1755 Cumberland Drive, Harrisonburg VA 22801

Vice President: Robert Hudelson

Address: 12175 NE 19th Ave, # 4 Miami FL 33181

Secretary: Robert Hudelson

Address: 12175 NE 19th Ave, # 4 Miami FL 33181

Treasurer: Bill Hudelson

Address: 1755 Cumberland Drive, Harrisonburg VA 22801

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

13. Robert Hudelson
(Signature of Director or Officer listed in number 12 of the application)

14. Robert Hudelson - Vice President

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

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Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "A LIVE ANSWER, 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 EIGHTEENTH DAY OF JUNE, A.D. 2008.

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SECRETARY OF STATE
DELAWARE



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

Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6670616

DATE: 06-18-08