

FO9000004488

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

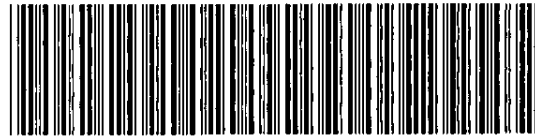
(Business Entity Name)

(Document Number)

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2009 NOV 17 PM 12:02
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09 NOV 17 PM 12:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers NOV 17 2009

CORPDIRECT AGENTS, INC. (formerly CCRS)
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT. #FCA-14

**Need to have
filed today**

CONTACT: ASHLEY SMITH

DATE: 11-17-2009

REF. #: 001993.114568

CORP. NAME: LIQUID SECRETS, INC.

- | | | |
|---|---|--|
| <input type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input checked="" type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP | <input type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | | |
| <input type="checkbox"/> OTHER: | | |

STATE FEES PREPAID WITH CHECK# 532613 FOR \$ 87.50

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

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TALLAHASSEE, FLORIDA

_____ COST LIMIT: \$ _____

PLEASE RETURN:

- | | | |
|--|--|--|
| <input type="checkbox"/> CERTIFIED COPY | <input checked="" type="checkbox"/> 2 CERTIFICATE OF GOOD STANDING | <input checked="" type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS | | |

Examiner's Initials

**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. Liquid Secrets, 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 3. 27-0792339
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 8/20/09 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist on "perpetual")

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

7. 5551 Lockett Road - #605
(Principal office address)
Fort Myers, FL 33905-5509
(Current mailing address)

8. Any lawful purpose the Corporation shall determine
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
as set forth by the laws of the State of Delaware

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Joe B. Cox, Esq., Cox & Nici

Office Address: 1185 Immo Kalee Rd - Ste 110
Naples, Florida 34110
(City) (Zip 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.

Joe B Cox
(Registered agent's signature) Joe B. Cox

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.

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TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: John A. Stewart
Address: 704 N. King Street - Ste 500 / 5551 Luckett Rd #605
P.O. Box 1031 / Fort Myers, FL 33905
Wilmington, DE 19899

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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CLERK OF COURT
TALLAHASSEE, FLORIDA

B. OFFICERS

~~President~~ CFO John A. Stewart
Address: 704 N. King Street - Ste 500 / 5551 Luckett Rd - #605
P.O. Box 1031 / Fort Myers, FL 33905
Wilmington, DE 19899

SR. Vice President: Douglas L. Keyser
Address: 704 N. King Street - Ste 500 / 5551 Luckett Rd - #605
P.O. Box 1031 / Fort Myers, FL 33905
Wilmington, DE 19899

~~President~~ Secretary: Lesley Stewart

Address: same / same

~~Vice President~~ Laurence Stewart

Address: same / same

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

13. [Signature]
(Signature of Director or Officer listed in number 12 of the application)

14. Douglas L. Keyser
(Typed or printed name and capacity of person signing application)

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT "LIQUID SECRETS, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

THE FOLLOWING DOCUMENTS HAVE BEEN FILED:

CERTIFICATE OF INCORPORATION, FILED THE TWENTIETH DAY OF AUGUST, A.D. 2009, AT 2:36 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CERTIFICATES ARE THE ONLY CERTIFICATES ON RECORD OF THE AFORESAID CORPORATION, "LIQUID SECRETS, INC.".

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

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TALLAHASSEE, FLORIDA

4722653 8310

091013430



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


Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 7639172

DATE: 11-13-09