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### **COVER LETTER**

TO: New Filing Se Division of Co						
SUBJECT: L	atino Outreach (	OnSul- ation - mus	hing of M	The.	_	<del></del>
Dear Sir or Madam:						
"Certificate of Existen	ntion by Foreign Corporation ce," or "Certificate of Good gn corporation to transact bu	Standing"	and check are sub-			
Please return all corres	pondence concerning this m	atter to the	following:			
	Arianna	_ M	Aquilar			
		e of Persor	1			
	Latino Ou	treac	h Consult	inq		
	Firm/	Company		J		
<u>2440 SE</u>	Fed Hwy	Suite	101			
	' A	ddress		271		
	Stuart, FL	31	1994			
	City/Sta	ate and Zip	code		HAR	IER
	ariann	<u>a@10</u>	cnc.com	<u> </u>	<u></u>	i
	E-mail address: (to be u	sed for fut	ure annual report r	notification)	PM	
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Arianna M	Aguilar at (8)	<u> </u>	329 - 32!	<u> </u>	_	
Name of Person	on A	rea Code &	& Daytime Teleph	one Number		
New Filing Se Division of Co Clifton Buildi	orporations ng e Center Circle		MAILING A New Filing Se Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7		
Enclosed is a check for	r the following amount:					
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status		75 Filing Fee & ified Copy	S87.50 Fili	of Stat	

### 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. Latino Outreach Consulting of NC, Inc
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") Latino Ostreach Consulting Inc
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 2. North Carolina 3. 20-2679711 (State or country under the law of which it is incorporated) (FEI number, if applicable) (Date of incorporation)

5. Per petual
(Duration: Year corp. will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 2440 SE Federal Hwy Suite 101 Stuart FL 34994
(Principal office address)

2440 SE Federal Hwy Suite 101 Stuart FL 34994
(Current mailing address) 8. Translation and Intropeting
(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) Arianna M Aguilar Name: 2440 SE Federal Huy Suite 101

Stuart , Florida 34994
(City) (Zip code) Office Address: 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. DIREC	CTORS		
Chairman:	Arianna M Aguilar		
Address: _	2440 SE Fed Hwy Suite 101		
	Stuart, Fr 34994	a .	
	nan:		
Address: _	31		
			<del></del>
Director: _	11		
Address: _	13	<del></del>	
—	N.		
	1;		
Address:	<u> </u>		
B. OFFIC	ERS	271	
	Arianna M Aguilar	2010 MAR Secsed	
	2440 SE Fed Hwy Suite 101	Str. Contraction	
	Stuart, FL 34994		
	ent:	PH 2:	
	Ц	23	
Secretary: _	l)		
Address: _	Ц		
Treasurer:	· · · · · · · · · · · · · · · · · · ·		
Address: _	ti		
NOTE: If	necessary, you may attach an addendum to the application listing additional officers ar	nd/or directors	
	a magnification is application is string additional officers at	id/of directors.	
13	(Signature of Director or Officer listed in number 12 of the application)	<u>.</u>	
14	Arianna M. Aguilar, President		
	(Typed or printed name and capacity of person signing application)		



## NORTH CAROLINA Department of The Secretary of State

#### CERTIFICATE OF EXISTENCE

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

### LATINO OUTREACH CONSULTING OF NC, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 21st day of April, 2005, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.

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IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 24th day of February, 2010.

Elaine I. Marshall

Secretary of State