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2010 APR -6 AM 8:08
TALLAHASSEE, FLORIDA

J. Shivers APR 07 2010

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Freedom Report Network, 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," or "Certificate of Good Standing" 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:

Michelle Larkin

Name of Person

Freedom Report Network INC

Firm/Company

1489 West Palmetto Park Road, Suite 360

Address

Boca Raton, Florida 33486

City/State and Zip code

mss1962@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michelle Larkin

Name of Person

at (561) 665 1106

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

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2010 APR -6 AM 8:08
TALLAHASSEE, FL

**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. Freedom Report Network, 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. Wyoming 3. 27-2250891
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 10-25-2007 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

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

7. 1489 West Palmetto Park Road, Suite 360, Boca Raton, Florida 33486
(Principal office address)

1489 West Palmetto Park Road, Suite 360, Boca Raton, Florida 33486
(Current mailing address)

8. SALES and Marketing
(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: Michelle Larkin

Office Address: 1489 West Palmetto Park Road, Suite 360
Boca Raton, Florida 33486
(City) (Zip code)

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DEPT. 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.

Michelle Larkin
(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: Michelle Larkin

Address: 1489 West Palmetto Park Road, Suite 360
Boca Raton, Florida 33486

Director: _____

Address: _____

B. OFFICERS

President: Michelle Larkin

Address: 1489 West Palmetto Park Road, Suite 360
Boca Raton, FL 33486

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13. M. Larkin

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

14. Michelle Larkin

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATE OF WYOMING
Office of the Secretary of State

I, MAX MAXFIELD, Secretary of State of the State of Wyoming, do hereby certify that the filing requirements for the issuances of this certificate have been fulfilled.

CERTIFICATE OF GOOD STANDING

OF

**Freedom Report Network, Inc. converted from a Wyoming Nonprofit Corporation
to Freedom Report, Inc. a Wyoming Profit Corporation,
on August 4, 2009**

I FURTHER CERTIFY that this company has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and that Articles of Dissolution have not been filed, thus making the company in existence in the State of Wyoming.

I have affixed hereto the Great Seal of the State of Wyoming and duly executed this official certificate at Cheyenne, Wyoming on this Thursday, February 18, 2010.

FILED
2010 APR -6 AM 8:08
WYOMING
CLERK OF DISTRICT COURT



Max Maxfield
Secretary of State

By: _____ Rosalie Gonzales