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bm 6/9/11

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: SEAFREEDOM CORP.

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:

JAVIER CARDENAS

Name of Person

SEAFREEDOM CORP

Firm/Company

1304 SW 160TH AVENUE PMB 127

Address

SUNRISE, FLORIDA 33326

City/State and Zip code

JAVIERJC@BELLSOUTH.NET

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

For further information concerning this matter, please call:

JAVIER CARDENAS

Name of Person

at (954) 288-5078

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. SEAFREEDOM CORP

(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. BRITISH VIRGIN ISLANDS

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

3. _____

(FEI number, if applicable)

4. NOVEMBER, 05, 1990

(Date of incorporation)

5. PERPETUAL

(Duration: Year corp. will cease to exist or "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. 1304 SW 160TH AVENUE PMB 127, SUNRISE, FLORIDA 33326

(Principal office address)

1304 SW 160TH AVENUE PMB 127, SUNRISE, FLORIDA 33326

(Current mailing address)

8. OWN AND RENT RESIDENTIAL REAL ESTATE PROPERTY AND OTHER BUSINESS CONCERNS

(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: JAVIER CARDENAS

Office Address: 1634 ORCHID BEND

WESTON

(City)

, Florida 33327

(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.


(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.

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: JAVIER CARDENAS

Address: 1634 ORCHID BEND

WESTON, FLORIDA 33327

Director: _____

Address: _____

B. OFFICERS

President: FERNANDO CARDENAS

Address: 1622 SANDPIPER CIRCLE

WESTON, FLORIDA 33327

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. _____

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. JAVIER CARDENAS, DIRECTOR

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

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**TERRITORY OF THE BRITISH VIRGIN ISLANDS
BVI BUSINESS COMPANIES ACT, 2004**

**CERTIFICATE OF GOOD STANDING
(SECTION 235)**

The REGISTRAR OF CORPORATE AFFAIRS, of the British Virgin Islands HEREBY CERTIFIES
that, pursuant to the BVI Business Companies Act, 2004,

SEAFREEDOM CORP.

BVI COMPANY NUMBER: 1056702

1. Is on the Register of Companies;
2. Has paid all fees, annual fees and penalties that are due and payable;
3. Has not filed articles of merger or consolidation that have not become effective;
4. Has not filed articles of arrangement that have not yet become effective;
5. Is not in voluntary liquidation; and
6. Proceedings to strike the name of the company off the Register of Companies have not been instituted.



[Signature]

REGISTRAR OF CORPORATE AFFAIRS
1st day of October, 2010

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CITCO

Citco BVI Limited

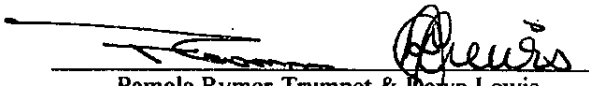
CERTIFICATE OF INCUMBENCY

We, Citco B.V.I. Limited of Wickhams Cay, P.O. Box 662, Road Town, Tortola, British Virgin Islands as Registered Agent of **Seafreedom Corp.**, existing and operating under the laws of the British Virgin Islands ("the Company") **HEREBY CERTIFY** that according to our records and to the best of our knowledge and belief, the following are the validly appointed Director and Officer of the Company:-

Javier Cardenas - **Director**
Fernando Cardenas - **President & Secretary**

There are no other appointed Directors or Officers in the Company.

Dated this 4th day of October, 2010.


Pamela Rymer-Trumpet & Dawn Lewis
Authorised Signatories
Citco B.V.I. Limited
Registered Agent

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*Citco BVI Limited
Wickhams Cay 1
Flemming House
P.O. Box 662
Road Town, Tortola
British Virgin Islands VG 1110*

*bvi-trust@citco.com
www.citco.com*

*Phone: +1 284 494 2217
Fax: +1 284 494 3917
Regulated by the
British Virgin Islands
Financial Services Commission*