# F11000003289

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							

Office Use Only



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WII- 41458



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

August 8, 2011

NEAL SIMMONS 7110 NW 4TH AVENUE BOCA RATON, FL 33487

SUBJECT: WI-FL CONSULTING SERVICES OF WYOMING

Ref. Number: W11000041458

We have received your document for WI-FL CONSULTING SERVICES OF WYOMING 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 name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

0

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper, that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

(X)

Please return the corrected original and one copy of 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) 245-6949.

Thomas Chang
Regulatory Specialist II
New Filing Section

Letter Number: 211A00018618

1 INC. AddED-SEE Pg 3/13.

8/11/2011

SEE ATTACHED STATE OF WYOMING CENTIFICATE OF GOOD STANDING.

ATTENTION: Thomas Chang REF: W11000041458 Muhe Seal (561) 213-7930

## COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: RF Consulting, Inc	
	on - must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for "Certificate of Existence," or "Certificate of Good St above referenced foreign corporation to transact busing	anding" and check are submitted to register the
Please return all correspondence concerning this matter	ter to the following:
Neal Simmons	
Name o	of Person
RF Consulting Inc	
Firm/Co	ompany
7110 NW 4th Avenue	
Add	dress
Boca Raton, FLorida 33487	
City/State	e and Zip code
NSIMM@AOL.COM	
E-mail address: (to be use	d for future annual report notification)
For further information concerning this matter, please	e call:
Neal Simmons at ( 561	, 213-7930
	a 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 & Certificate of Status	\$78.75 Filing Fee & S87.50 Filing Fee, Certified Copy 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. RF Consulting	g Inc. orporation; must include "INCORPORAT	ED	" "COMBANIV" "CODDODATIONI"			_
	orp," "Inc," "Co," or "Corp.")	ED,	COMPANY, CORPORATION,			
Wi-FI Consul	Iting Services of Wyoming, The able in Florida, enter alternate corporate na	1C.	-1	ala ana la F	in alda'	_
	able in Florida, enter alternate corporate n			iness in r	iorida)	I
2. Wyoming	1 4 4 1 1	_ 3.	90-0734709			_
,	under the law of which it is incorporated)		(FEI number, if applicab	.e)		
4. June 06, 20	of incorporation)	5.	Perpetual (Duration: Year corp. will cease to exis	t or "parne	atual"\	_
·	,		(Duration: Year corp. will cease to exis	tor perpe	iuai )	
6. August 10, 2		ess i	n Florida, if prior to registration)			-
			502, F.S., to determine penalty liability)			
7. 7110 NW 4	th Avenue Boca Raton, Flo					_
	(Principal office	add	ress)			
7110 NW 4	Ith Avenue Boca Raton,					_
	(Current mailing	add	ress)			
8. Any Lawful	Activity					
	) of corporation authorized in home state	or co	ountry to be carried out in state of Florida)			-
9. Name and stree	t address of Florida registered agent:	(P.C	D. Box NOT acceptable)	77*k		
Name:	Neal Simmons					41000
Name:				10 m	<u> </u>	* (
Office Address:	7110 NW 4th Avenue		<u></u>	455 553	$\overline{\sim}$	# . E . V
	Boca Raton		, Florida 33487	<u> </u>	Tre	176 - C. L. L. 186 - C. L. L. L. 186 - 1
	(City)		(Zip code)	10 C	رن 	
10. Registered ag	ent's acceptance:				zл	* ***
	ed as registered agent and to accept s					
	application, I hereby accept the appo omply with the provisions of all statut					
	with and accept the obligations of my					

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.

(Registered agent's signature)

12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Neal Simmons Address: 7110 NW 4th Avenue Boca Raton, FL 33487 Vice Chairman: \_\_\_\_\_ Director: Address: \_\_\_\_\_ **B. OFFICERS** President: Neal Simmons Address: 7110 NW 4th Avenue Boca Raton, FL 33487 Vice President: Secretary: Neal Simmons Address: 7110 NW 4th Avenue Boca Raton, Florida 33487 Treasurer: Neal Simmons Address: 7110 NW 4th Avenue Boca Raton, FL 33487 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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. Neal Simmons, President, Secretary and Treasurer

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

## STATE OF WYOMING Office of the Secretary of State

I, MAX MAXFIELD, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

### RF Consulting Inc.

is a

### **Profit Corporation**

formed or qualified under the laws of Wyoming did on **June 6, 2011**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2011-000602439**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 11th day of August, 2011 at 12:08 PM. This certificate is assigned 010529115.



Ay V

Ç,

May Massiello Secretary of State

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Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website http://wyobiz.wy.gov and following the instructions displayed under Validate Certificate.