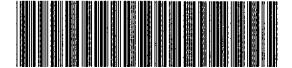
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





900248071269

05/21/13--01013--010 **78.75

MIZ - h GPW



May 22, 2013

SHERRY PHIPPS P.O. BOX 832 BRIGHAM CITY, UT 84302

SUBJECT: CONFERENCE CONNECT

Ref. Number: W13000029840

We have received your document for CONFERENCE CONNECT and your check(s) totaling \$78.75. 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.

Please return 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) 245-6052.

Letter Number: 513A00012872

Maryanne Dickey Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Conference Connect	
	ion - must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation as "Certificate of Existence," or "Certificate of Good S above referenced foreign corporation to transact bus	tanding" and check are submitted to register the
Please return all correspondence concerning this ma	tter to the following:
Sherry Phipps	
Name	of Person
Conference Connect	
Firm/C	ompany
P O Box 832	
Ac	ldress
Brigham City, UT 84302	
City/Stat	e and Zip code
accounting@conferenceconnect.us	
E-mail address: (to be use	ed for future annual report notification)
For further information concerning this matter, please	se call:
Sherry Phipps at (310	707-1234
	ea 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

APPLICA			ION FOR AUTHORIZATION TO IN FLORIDA		ii.
			TATUTES, THE FOLLOWING IS SUB BUSINESS IN THE STATE OF FLORID		J 王 -3
1. Conference C	onnect Inc.			7	- 2
	orporation; must include "INCORPORATION," "Inc," "Co," or "Corp.")	ED,	" "COMPANY," "CORPORATION,"	FLORIDA	- 3: 3:39
(If name unavaila	ble in Florida, enter alternate corporate na	me	adopted for the purpose of transacting bus	iness in Fl	orida)
2. Wyoming		3.	263413100		
(State or country t	under the law of which it is incorporated)		(FEI number, if applicable	:)	
4. September 3	3, 2008	5.	Perpetual		
· · · · · · · · · · · · · · · · · · ·	of incorporation)		(Duration: Year corp. will cease to exist	or "perpe	tual")
6.					
			n Florida, if prior to registration) 502, F.S., to determine penalty liability)		
7, 702 West 2	2nd Street, San Pedro, CA	90	0731		
	(Principal office	add	ress)		
P O Box 83	32, Brigham City, UT 8430)2			
	(Current mailing	add	iress)		
• • • • • • • • • • • • • • • • • • • •	data networks and related				<u></u>
(Purpose(s) of corporation authorized in home state c	of 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)		
Name:	Registered Agents Inc.				
Office Address:	3030 N. Rocky Point Dr. STE	1:	50A		
	Tampa		, Florida 33607		
	(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.

Dan Keen-President (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: Paul Phipps Address: 702 West 22nd Street San Pedro, CA 90731 Vice Chairman: Address: Director: Address: ___ Director: **B. OFFICERS** President: Daniel Page Address: 702 West 22nd Street San Pedro, CA 90731 Vice President: Daniel Gutierrez Address: 702 West 22nd Street San Pedro, CA 90731 Secretary: Paul Phipps Address: 702 West 22nd Street, San Pedro, CA 90731 Treasurer: Sherry Phipps Address: P O Box 832, Brigham City, UT 84302 **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. Sherry Phipps, Treasurer

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

STATE OF WYOMING Office of the Secretary of State

13 JUN -3 PH SEASON FOOD

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

Conference Connect

is a

Profit Corporation

formed or qualified under the laws of Wyoming did on **September 3, 2008**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2008-000559805**.

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 2nd day of January, 2013 at 11:16 AM. This certificate is assigned 013098324.



May Maffield Secretary of State

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.