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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: FLUENT CITY (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:
Tomas Hundley
Tomas Huntley Name of Person
FLUENT CITY
FLUENT CITY Firm/Company
143 SKILLMAN AVE
Address
BROOKLYN NY 11211 City/State and Zip code
tomas @ fluentcity . com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (347) 687 - 6896 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 & Certificate of Status & Certified Copy



September 12, 2013

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

To Whom It May Concern:

REGISTERING AS A FOREIGN CORPORATION

Fluent City is registering as foreign corporation in the State of Florida. We request a certified copy of our filed document and a Certificate of Status be sent to us.

If you have any questions of concerns, you may contact me at (347) 687-6896 or at tomas@fluentcity.com.

Sincerely,

Tomas Huntley
Business Manager
Fluent City, Inc.

Enclosures: 5

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.	
I FLUENT CITY 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 NEW YORK 3. 27-5255369	
(State or country under the law of which it is incorporated) (FEI number, if applicable)	
4 2/22/2011 5 PERPETUAL	
(Date of incorporation) (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. 143 SKILLMAN AVE BROOKINN NY 11211	
(Principal office address)	
143 SKILLMAN AVE, BROKWN, NY 11211	
(Current mailing address)	
8. FOREIGN LANGUAGE PROGRAMS FOR ADULTS	
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)) S tweetig
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	7
	O garanno
Name: YVES PARABIS	၁ နိ
. "13	
	у <u>Г</u> Л
(City) (Zip code) 童声	'n
10. Registered agent's acceptance:	-
Having been named as registered agent and to accept pervice 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 stalutes relative to the proper and complete performance of my	
furnier 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	ı
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	
Director:	
Address:	
Director:	`v
Address:	
	FP 2
B. OFFICERS	Øγ ω Do n Febr
President: MATTHEW MAKER	
Address: 193 SKILLMAN AVE BR	75.5 PAIE 1810
BROOKLYN N/ 11211	-
Vice President:	
Address:	
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional of	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) affi are true and that he or she is aware that false information submitted in a document to the a third degree felony as provided for in s.817.155, F.S.	irms that the facts stated herein Department of State constitutes
14. MATTHEW MAILER - PRESIDENT	
(T)	

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

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of FLUENT CITY INC. was filed on 02/22/2011, under the name of FLUENTBROOKLYN INC., with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

A Certificate of Amendment FLUENTBROOKLYN INC., changing its name to FLUENT CITY INC., was filed 05/03/2012.

The Biennial Statement is past due.



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CLCT'S FIRS

WITNESS my hand and the official seal of the Department of State at the City of Albany, this 28th day of August two thousand and thirteen.

Executive Deputy Secretary of State