F13000005558

(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: Brenda Taylor GAVE				
AUTHORIZATION BY PHONE TO				
CORRECT 12 B on app				
DATE $\frac{12/31/13}{11/11}$				
DOC. EXAM				
-6H3-66/21				

Office Use Only



600254216316

12/03/13--01013--010 **87.50

SECRETARY OF STATE OR STORE OF CORPORATION OF CORPORATION

1/4

COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: TORT LAW MAIN Name of corpora	CKETEN L, INC	
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation." Certificate of Existence," or "Certificate of Good above referenced foreign corporation to transact but	Standing" and check are sub-	
Please return all correspondence concerning this m	atter to the following:	
BRENDA Name	TAYLOR e of Person	
TORT LAW M	ARKETTNO,	znc_
Finn/	Сопрану	
7101 COASTAL HIGH	1WAY # 31	
A	Address	
OCEAN CETY, MO	21843	
^	•	
BRENDA TORTLA E-mil address: (to be u	WMARKETENC	. <u>co</u>
E-Mail address: (to be u	sed for future annual report n	otification)
For further information concerning this matter, ple	ase call:	
Name of Person at (4)	<u>43) 797-3770</u>	
Name of Person A	rea Code & Daytime Telepho	me Number
STREET/COURIER ADDRESS:	MAILING AI	-
New Filing Section Division of Corporations	New Filing Section Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle Tallahassee, FL 32301	Tallahassee, Fl	L 32314
Enclosed is a check for the following amount:		
S70.00 Filing Fee S78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy



December 5, 2013

BRENDA TAYLOR 7101 COASTAL HIGHWAY #3117 OCEAN CITY, MD 21843

SUBJECT: TORT LAW MARKETING, INC

Ref. Number: W13000066721

We have received your document for TORT LAW MARKETING, INC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

The name and title of the person signing the document must be noted beneath or opposite the signature.

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) 245-6052.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 113A00027784

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.

"Inc.," "Co.," "C	orporation; must include "INCORP lorp," "Inc," "Co," or "Corp.")	ORATED," "COMPANY," "CORPORATION,"	
(If name unavail	able in Florida, enter alternate corpo	orate name adopted for the purpose of transacting business in Florida)	****
WYON	ING	3. 46-0883401	
(State or country	under the law of which it is incorpo	3. 46-0883401 (FEI number, if applicable)	
08-1	5-3012	5. PERPRYNAW	
(Date	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")	
5	02-15-13		
		l business in Florida, if prior to registration) 01 & 607.1502, F.S., to determine penalty liability)	_
710	1 CORSTAL H	EUHWAY # 3117 ODEAN CETM, M	0 S1843
710	1 COASTAL T	TE GHWAY 12 3117 OCEAN CTTY, Mailing address)	<u>^</u> ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
(Purpose(s		state or country to be carried out in state of Florida)	•••
(Purpose(s	et address of Florida registered a	estate or country to be carried out in state of Florida) egent: (P.O. Box NOT acceptable)	- V.,,
(Purpose(s)). Name and <u>stree</u> Name:	of corporation authorized in home at address of Florida registered a	state or country to be carried out in state of Florida) gent: (P.O. Box NOT acceptable)	SECRE I
(Purpose(s)). Name and <u>stree</u> Name:	of corporation authorized in home at address of Florida registered a BRENDA TONG	estate or country to be carried out in state of Florida) agent: (P.O. Box NOT acceptable) ST SUSSE 98956	SECRETARY SIVISION OF C
(Purpose(s)). Name and <u>stree</u> Name:	of corporation authorized in home at address of Florida registered a BRENDB TO 382 NE 19157	state or country to be carried out in state of Florida) igent: (P.O. Box NOT acceptable) ST SUSTE 98956 Florida 33174	SECRETARY OF SIVISION OF CORP
(Purpose(s). Name and <u>stree</u> Name: Office Address:	of corporation authorized in home at address of Florida registered a BRENDA TRY 382 NE 19150 MEANT (City)	state or country to be carried out in state of Florida) agent: (P.O. Box NOT acceptable) State or country to be carried out in state of Florida) Figure 1. Florida 33174 (Zip code)	SECRETARY OF STA
(Purpose(s). Name and <u>stree</u> Name: Office Address:	Security acceptance:	state or country to be carried out in state of Florida) Igent: (P.O. Box NOT acceptable) State or country to be carried out in state of Florida) Representation of Florida acceptable of Florida ac	
(Purpose(s). Name and stree Name: Office Address: 0. Registered aglaving been nam lesignated in this outher agree to co	SCENDA 19157 BRENDA 19157 382 WE 19157 (City) gent's acceptance: ed as registered agent and to acceptly with the provisions of all	state or country to be carried out in state of Florida) Igent: (P.O. Box NOT acceptable) State of Pool of State of Plorida State of Plorida State of Plorida (Zip code) Composition of Process for the above stated corporation at the eappointment as registered agent and agree to act in this cap is statutes relative to the proper and complete performance of the performance o	Hace acity. I
(Purpose(s). Name and stree Name: Office Address: 0. Registered aglaving been nam lesignated in this outher agree to co	SCENDA 19157 BRENDA 19157 382 WE 19157 (City) gent's acceptance: ed as registered agent and to acceptly with the provisions of all	state or country to be carried out in state of Florida) Igent: (P.O. Box NOT acceptable) State of Poolida Salari (Zip code) Coept service of process for the above stated corporation at the appointment as registered agent and agree to act in this cap	Hace acity. I

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:

SECRETARY OF STATE

A. DIRECTORS	ONVISION OF CORPORALISM	
Charman:	2413 DEC 23 PM 3: 30	
Address:		
Vice Chairman:		
Address:		
Director.		
Address:	gapper will find the first trapped on which the party of the party of the first trapped of the first trapped on th	
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Director.	······································	
Address:		
	ANNIAN	
B. OFFICERS	•	
President:	Supplied Shift of A. C. A. C. School Shift of Control o	
BRENDA TAYLOR Address: 7101 COASTAL HIGHWAY #3117 OCEAN CITY, MD 21843		
Vice President:		
Address		
Sacratore		
Address.		
Treasurer:		
Address:		
NOTE: If necessary, you may attach an addendum to the amplication listing a	additional officers and for directing	
13 Prinde Taylor	mer and the contract of the co	
Signature of Director or Officer	William	
The officer or director signing this document (and who is listed in number 12 are true and that he or she is aware that false information submitted in a document degree felony as provided for in s.817.155, F.S.	above) affirms that the facts stated herein ment to the Department of State constitutes	
	iner	
(Typed or printed name and capacity of person signing		

State of Wyoming am DEC 23 PM 3: 30 Office of the Secretary of State of America, ning ss. ELD, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according fice. Tort Law Marketing Inc is a Profit Corporation er the laws of Wyoming did on August 15, 2012, comply with all applicable requirements of this ation is Perpetual. This entity has been assigned entity identification number 2012-000627541. existence and in good standing in this office and has filed all annual reports and paid all annual ris not yet required to file such annual reports; and has not filed Articles of Dissolution. Iereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, ornmunicated this official certificate at Cheyenne, Wyoming on this 21st day of November, Rosalie Gonzales.



United States of America, State of Wyoming

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

formed or qualified under the laws of Wyoming did on August 15, 2012, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number 2012-000627541.

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 21st day of November, 2013 at 8:28 AM.

