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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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COUNTY OF FLORIDA

FEB 0 5 2016

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Liberty Resources Family Services, Inc.

Name of Corporation – must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

Joanna Viggiano

Name of Person

Liberty Resources Family Services, Inc.

Firm/Company

1045 James Street

Address

Syracuse, NY 13203

City/State and Zip Code

jviggiano@liberty-resources.org

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

For further information concerning this matter, please call:

Joanna Viggiano

Name of Person

at (315)
Area Code

425-1004

Daytime Telephone Number

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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 NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO
CONDUCT ITS AFFAIRS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN
THE STATE OF FLORIDA:*

1. Liberty Resources Family Services, Inc.

(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware 3. 90-0418115
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 10/06/08 5. _____
(Date of Incorporation) (Date of duration, if other than perpetual)

6. _____
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 1045 James Street, Syracuse, NY 13203
(Principal office address)

(Current mailing address, if different)

8. See attached
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)

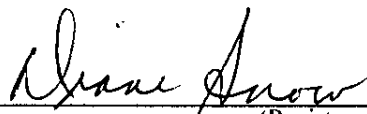
Name: Diane Snow

Office Address: 801 International Parkway, # 5082

Lake Mary, Florida 32746
(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.



(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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DEPT. OF STATE
TALLAHASSEE, FLORIDA

12. Names and addresses of officers and/or directors

A. DIRECTORS

Chairman: Sean Roddy
1045 James Street, Syracuse, NY 13203
Address:

Vice Chairman: Joseph Verzino
1045 James Street, Syracuse, NY 13203
Address:

Director: Dr. Norman Lesswing
1045 James Street, Syracuse, NY 13203
Address:

Director: N/A
Address: N/A

B. OFFICERS

President: Carl Coyle
1045 James Street, Syracuse, NY 13203
Address:

Vice President: N/A
Address: N/A

Secretary: N/A
Address: N/A

Treasurer: Joanna Viggiano
1045 James Street, Syracuse, NY 13203
Address:

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Joanna Viggiano, CFO
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Joanna Viggiano, Chief Financial Officer
(Typed or printed name and capacity of person signing application)

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CLERK OF SUPERIOR COURT
ALTAIR, FLORIDA

Liberty Resources Family Services, Inc.

8. Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida

To engage in any lawful act or activity for which corporations may be organized; to provide enlightenment about services available for children and youth who are delinquent, emotionally disturbed, deaf and hearing impaired, status offenders, neglected, abused, abandoned, blind and visions impaired, convalescent, multiple handicapped, socially maladjusted, pregnant, adolescent parents; whose parents are unable to carry out their child rearing responsibilities without assistance; who are referred to the Corporation for care during temporary periods of convalescence when hospitals or other institutional health care services are not provided; to provide programs to preserve, strengthen, support and restore the family, including family counseling and support, parent training services, professional programs, crisis counseling, pregnancy counseling, community-based comprehensive family-centered services, day camps and day treatment services; to carry on programs of community enlightenment in all of the foregoing areas; to carry out research in all aspects of the foregoing programs and services, and to publish findings; and to solicit and receive funds for the accomplishment of all the foregoing purposes.

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CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

Delaware

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Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LIBERTY RESOURCES FAMILY SERVICES, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FIRST DAY OF JANUARY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CORPORATION IS AN EXEMPT CORPORATION.

FILED
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DELAWARE SECRETARY OF STATE



4608707 8300C

SR# 20160196899

You may verify this certificate online at corp.delaware.gov/authver.shtml


Jeffrey W. Bullock, Secretary of State

Authentication: 201706218

Date: 01-21-16

**State of Delaware**

SECRETARY OF STATE
DIVISION OF CORPORATIONS
P.O. BOX 898
DOVER, DELAWARE 19903

9177024

01-21-2016

JOANNA D. VIGGIANO
1045 JAMES STREET
SYRACUSE, NY 13203

ATTN: JOANNA D. VIGGIANO

DESCRIPTION	AMOUNT
4608707 - LIBERTY RESOURCES FAMILY SERVICES, INC. Entity Status - Short Form	
Certification Fee	\$50.00
TOTAL CHARGES	\$50.00
TOTAL PAYMENTS	\$50.00
BALANCE	\$0.00