

F18000003717

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

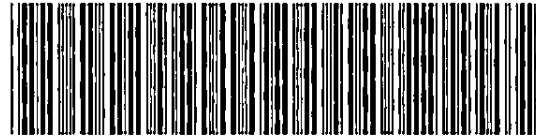
(Document Number)

Certified Copies _____ Certificates of Status _____

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07/16/18--01010--025 **78.75

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18 AUG 10 AM 7:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

O. SIMMONS
AUG 14 2018



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 23, 2018

RICHARD DE FREITAS
3704 ISLAES ARBOR LANE
KISSIMMEE, FL 34746

SUBJECT: AVENUES TO INDEPENDENT LIVING, INC.
Ref. Number: W18000066690

We have received your document for AVENUES TO INDEPENDENT LIVING, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons
Regulatory Specialist III

Letter Number: 818A00015032

RECEIVED
2018 AUG 10 AM 10:14
DIVISION OF CORPORATIONS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AVENUES TO INDEPENDENT LIVING 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:

RICHARD DE FREITAS

Name of Person

ARBOR ISLE VENTURES LLC

Firm/Company

3704 ISLES ARBOR LANE

Address

KISSIMMEE, FL 34746

City/State and Zip code

RICHARD@ARBORISLEVENTURES.COM

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

For further information concerning this matter, please call:

RICHARD DE FREITAS at (856) 491 6021

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

Registration 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

**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. AVENUES TO INDEPENDENT LIVING 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 JERSEY 3. 223822714
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 5/21/2001 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

6. N/A
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 55 CURTIS AVE, WOODBURY, NJ 08095
(Principal office address)

(Current mailing address, if different)

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

Name: RICHARD DE FREITAS

Office Address: 3704 ISLES ARBOR LANE

KISSIMMEE Florida 34746
(City) (Zip code)

9. 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.

Richard De Freitas

(Registered agent's signature)

10. 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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AUG 10 AM 7:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: JOAN CLARK

Address: 55 CURTIS AVE

WOODBURY, NJ 08096

Vice Chairman: MARVIN CLARK

Address: 55 CURTIS AVE

WOODBURY, NJ 08096

Director: STEPHANIE LUNDFELT

Address: 55 CURTIS AVE

WOODBURY, NJ 08096

Director: RICHARD DEFREITAS

Address: 3704 ISLES ARBOR LANE

KISSIMMEE, FL 34746

B. OFFICERS

President: JOAN CLARK

Address: 55 CURTIS AVE

WOODBURY, NJ 08096

Vice President: STEPHANIE LUNDFELT

Address: 55 CURTIS AVE

WOODBURY, NJ 08096

Secretary: STHELLE DEFREITAS

Address: 3704 ISLES ARBOR LANE, KISSIMMEE, FL 34746

Treasurer: _____

Address: _____

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

12. Richard Defreitas

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 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.

13. RICHARD DEFREITAS DIRECTOR

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

FILED
18 AUG 10 AM 7:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**STATE OF NEW JERSEY
DEPARTMENT OF THE TREASURY
DIVISION OF REVENUE AND ENTERPRISE SERVICES
SHORT FORM STANDING**

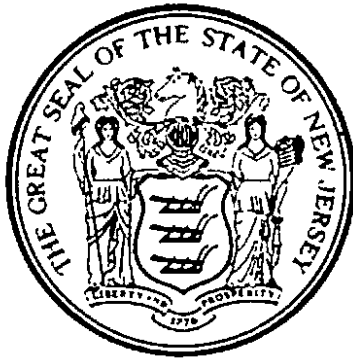
**AVENUES TO INDEPENDENT LIVING, INC.
0100851059**

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic For-Profit Corporation was registered by this office on May 21, 2001.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and office are:

JOAN CLARK
55 CURTIS AVE
WOODBURY, NJ 08096



*IN TESTIMONY WHEREOF, I have
hereunto set my hand and affixed
my Official Seal at Trenton, this
1st day of August, 2018*

Elizabeth Maher Muoio
State Treasurer

Certificate Number : 6090179983

Verify this certificate online at

https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp