# F19000000418

(Requestor's Name)			
(Kodobiel & Kallie)			
(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:			
WB-110 39 3			
Q-110			
$\mathcal{N}_{ID}$			

Office Use Only



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December 28, 2018

DEBI FREY THE FREY CONSULTING GROUP, INC. PO BOX 1690 SATA ROSA BEACH, FL 32459

SUBJECT: THE FREY CONSULTING GROUP, INC.

Ref. Number: W18000110393

We have received your document for THE FREY CONSULTING GROUP, INC. and your check(s) totaling \$70.00. 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.

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 (805) 245-6000.

Letter Number: 118A00026466

Brenda L Vorisek Director

www.sunbiz.org

### **COVER LETTER**

TO: Registration Section Division of Corporations				
SUBJECT: The Frey Consul	ting Groz	sp. In	se ,	
Name of corporat	tion - must inch	ude suffix		
Dear Sir or Madam: The enclosed "Application by Foreign Corporation "Certificate of Existence," or "Certificate of Good Sabove referenced foreign corporation to transact bus	Standing" and c	check are sub		
Please return all correspondence concerning this ma				
Fray Consulting Firm/Company				
Fray Consulting Firm/Company Po Box 1691	٥			
A	ddress			
Santa Rosa Brac	h, FL	324	59	
	te and Zip code			
debi e Fray-	group, con	<u></u>		
E-mail address: (to be us	•		notification) For	
further information concerning this matter, please c	all:			
Debi Fray at 1985	5 <u>) 373</u>	3-8187	2	
Debi Frey at (985) Name of Person Area (	Code Da	aytime Telep	hone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Building 2661 Executive Center Circle Tallahassee, FL 32301	R E P.O. Box	MAILING ADDRESS: Registration Section Division of Corporations Clifton P.O. Box 6327 Tallahassee, FL 32314		
Enclosed is a check for the following amount:				
\$70.00 Filing Fee \$\int \text{Syclosical} \text{Certificate of Status}	S78.75 Fi Certified	_	☐ \$87.50 Filing Fee. Certificate of Status & Certified Copy	

## . APPLICÁTION 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. The Frey	Consulting Gro	up, Inc.			
(Enter name of corporation	: must include "INCORPORATED," "C	OMPANY," "CORPORATION,"			
"Inc.," "Co.," "Corp." "Inc	." "Co," or "Corp.")				
(If name unavailable in Flo	orida, enter alternate corporate name adop	oted for the purpose of transacting business in Florida)			
2. Louisiana	3,	72-1506 852			
(State or country under th	ne law of which it is incorporated)	(FEI number, if applicable)			
4. 7/5/20	5 100				
(Date of incorp		(Date of duration, if other than perpetual)			
6	leptember 2018				
7	(Date first transacted business in Flo SEE SECTIONS 607.1501 & 607.1502. 7845 Antebel				
	(Principal o	ffice address)			
Po Box 1690, Sinta Rosa Deach, FL 3 2459					
	(Current mailing ac	ldress, if different)			
8. Name and street address	s of Florida registered agent: (P.O. B	ox <u>NOT</u> acceptable)			
Name: <u>Ke</u> r	neth Frey				
<u></u>	Den Som Crel	_ -			
Office Address: 35	Deean Joing Cita	<u></u>			
Sont	Dcean Spray Circl Ta Rosa Blach, FL	. Florida 32459			
	(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.

(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. 11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Address: \_\_\_\_\_ Vice Chairman: Address: Director: Address: B. OFFICERS President: Kenneth tre Address: PO BOX 1690 Santa Rosa Beach FL 32459 Vice President: \_\_\_\_\_\_ Address:

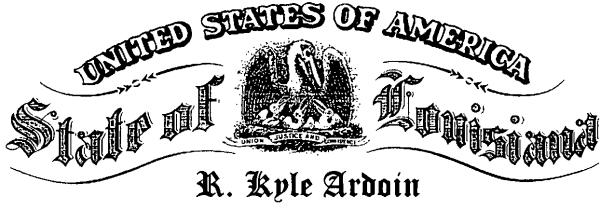
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

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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.

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



SECRETARY OF STATE

As Secretary of State, of the State of Louisiana, I do hereby Certify that

#### THE FREY CONSULTING GROUP, INC.

A corporation domiciled in BATON ROUGE, LOUISIANA,

Filed charter and qualified to do business in this State on July 05, 2001,

I further certify that the records of this Office indicate the corporation has paid all fees due the Secretary of State, and so far as the Office of the Secretary of State is concerned is in good standing and is authorized to do business in this State.

I further certify that this Certificate is not intended to reflect the financial condition of this corporation since this information is not available from the records of this Office.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

January 18, 2019

2 1 Fe No 2 Secretary of State

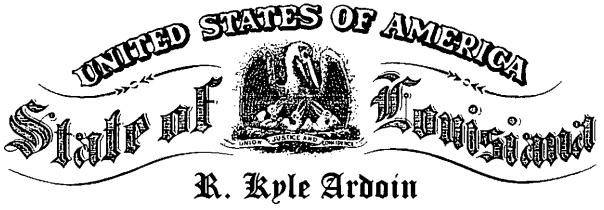
Web 35111201D



Certificate ID: 11033988#N8Q83

To validate this certificate, visit the following web site, go to Business Services, Search for Louisiana Business Filings, Validate a Certificate, then follow the instructions displayed.

www.sos.la.gov



SECRETARY OF STATE

As Secretary of State, of the State of Louisiana, I do hereby Certify that

the Articles of Incorporation of

#### THE FREY CONSULTING GROUP, INC.

Domiciled at BATON ROUGE, LOUISIANA,

Were filed in this Office and a Certificate of Incorporation was issued on July 05, 2001,

I further certify that no Certificate of Dissolution or Termination has been issued.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on.

January 18, 2019

R 12fe 162 Secretary of State

Web 35111201D



Certificate ID: 11033987#E5P83

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