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#### FLORIDA DEPARTMENT OF STATE Division of Corporations

March 21, 2019

TIMOTHY WRIGHT 502 DEWOLF RD BRANDON, FL 33511

SUBJECT: LIVING FREE CENTER INCORPORATION

Ref. Number: W19000027964

NULL MERSON DIE SPORTE

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

Pursuant to section 607.1502(4), 617.1502(4) or 605.0904(7), Florida Statutes, this entity is liable for a civil penalty of at least \$500 but not more than \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification. In addition to this civil penalty, the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state are also due. The amount due this office to cover both annual report(s) and penalty fees is \$561.25.

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

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 (850) 245-6051.

Dionne M Scott Regulatory Specialist II

Letter Number: 219A00005643

#### **COVER LETTER**

TO:	Registration Section Division of Corporations
SHRI	ECT: LIVING FREE CENTER INCORPORATION
3000	Name of Corporation – must include suffix
Dear S	ir or Madam:
Affair	closed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its in Florida". "Certificate of Existence", or "Certificate of Status" and check are submitted to the above referenced not for profit corporation to conduct its affairs in Florida.
Please	return all correspondence concerning this matter to the following:
	TIMOTHY WRIGHT
	Name of Person
	Name of Person  LIVING FREE CENTER INCORPORATION  Firm/Company
	Firm/Company
	502 DEWOLF ROAD
	Address
	BRANDON, ILLINOIS 33511
	City/State and Zip Code
	LIVINGFREECENTER@GMAIL.COM
	E-mail address: (to be used for future annual report notification)
For fu	rther information concerning this matter, please call:
TIMO	THY WRIGHT 773 499-6941 at ( )
	Name of Person Area Code 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
Please	sed is a check for the following amount: make check payable to: FLORIDA DEPARTMENT OF STATE
□ s	70.00 Filing Fee \$\Bigcup \$\Bigcup \text{\$\Bigcup \text{\$\Bi

## 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:

(If name unav	railable in Florida, enter alternate corpo	rate name adopted for the purpose of tr	ansacting business in Florida)	
ILLINOIS		2 61-1603765		
(State or co	antry under the law of which it is incorp	orated) (FEI number,	3.61-1603765 (FE) number, if applicable)	
OCTOBER 2	. 2009	<sub>5</sub> 10 YEARS		
	. 2009 Date of Incorporation)	(Date of duration.	if other than perpetual)	
2124				
(Date first con	ducted affairs in Florida if prior to registra	ation. See sections 617,1501 & 617,1502	2. F.S. to determine penalty liability.)	
502 DEWOL	F ROAD, BRANDON, FLORIDA 335	11	29	
	F ROAD, BRANDON, FLORIDA 335 (Prin	cipal office street address)		
			S S months	
	Curren	t mailing address, if different)	<u> </u>	
	Curren	t manning address, it differently		
AUNICTOV			الأسيان سن	
MINISTRY	Corporation authorized in home state o	r country to be carried out in the state of	of Florida) 👙 😅	
			7, -	
Name and <u>st</u>	reet address of Florida registered ag	ent: (P.O. Box <u>NOT</u> acceptable)		
	TO LOTTING WIND CUT			
Name:	TIMOTHY WRIGHT			
ffice Address	502 DEWOLF ROAD			
	BRANDON	, Florida 33511 (Zip C		
	(City)	(Zip C	(ode)	

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. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]: A. DIRECTORS Name: SIMEON OWENS Name: TIMOTHY WRIGHT □Chairman □Chairman Address: \_\_\_ Address: \_ □Vice Chairman ■Vice Chairman CHICAGO, ILLINOIS 60651 BRANDON, FLORIDA 33511 □Director **■**Director □President □President □Vice President □Vice President □Treasurer **■**Secretary □Treasurer □Secretary ☐ Other:\_\_\_\_\_ ☐ Other:\_\_\_\_\_ □Other: \_\_\_\_\_ ☐ Other:\_\_\_\_\_ Name: BARRY LYONS Name: TINY HOUSE □Chairman □Chairman Address: 502 DEWOLF ROAD 7335.SOUTH COLES Address: □Vice Chairman □Vice Chairman CHICAGOÉILLINOIS 60649 11 BRANDON, FLORIDA 33511 □Director □Director □President □President □Vice President ■Vice President ■Treasurer □Secretary □Treasurer □Secretary □ Other: ☐ Other:\_\_\_\_\_ ☐ Other: \_\_\_\_\_\_ □Other: \_\_\_\_\_ Name: LARRY HOUSE Name: \_\_\_\_\_ □Chairman **■**Chairman 502 DEWOLF ROAD Address: \_\_\_\_\_\_ □Vice Chairman □Vice Chairman Address: BRANDON, FLORIDA 33511 □Director □ Director □President □President □Vice President □ Vice President □Treasurer Treasurer □Secretary □Secretary ☐ Other:\_\_\_\_\_ ☐ Other:\_\_\_\_\_ Other: □Other: \_\_\_\_\_ NOTE: Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

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



### To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

LIVING FREE CENTER, A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON OCTOBER 02, 2009, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE GENERAL NOT FOR PROFIT CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 2019

day of

MARCH

A.D.

Authentication #: 1906302188 verifiable until 03/04/2020

Authenticate at: http://www.cyberdriveillinois.com

SECRETARY OF STATE