F24000000151

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(Address)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
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W24000021193					





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01/12/24--01017--007 **37.50



February 7, 2024

JEFF FRIDAY 4111 W ALAMEDA AVE SUITE 501 BURBANK, CA 91505 US

SUBJECT: FILM LIFE FOUNDATION INC

Ref. Number: W24000021193

We have received your document for FILM LIFE FOUNDATION 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):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Andrea Andrews Regulatory Specialist II

Letter Number: 024A00002731

2/12/24

COVER LETTER

TO:	Registration Section Division of Corporations
CHDI	ECT: FILM LIFE FOUNDATION INC
SODI	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 r the above referenced not for profit corporation to conduct its affairs in Florida.
Please	return all correspondence concerning this matter to the following:
	JEFF FRIDAY
	Name of Person
	NICE CROWD
	Firm/Company
	4111 W ALAMEDA AVE
	SUITE 501
	Address
	BURBANK, CA 91505
	City/State and Zip Code
	jeff@nicecrowd.com
	E-mail address: (to be used for future annual report notification)
For fu	ther information concerning this matter, please call:
WAR	REN BURGESS III 917 653-2532
	Name of Person Area Code Daytime Telephone Number
	Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Please	ed is a check for the following amount: make check payable to: FLORIDA DEPARTMENT OF STATE .00 Filing Fee

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:

(State or country under the law of which it is incorporated) JUNE 18, 2009 (Date of Incorporation) (Date of Incorporation if other than perpetual) (Part of Incorporation if other than perpetual in this state of Incorporation if other than perpetual in the state of Incorporation i	in the name at	present. Company or Co. may h	CORPORATED" or "CORPORATION" or words of a corporation instead of a natural person or partnet of the used as a corporate suffix by a nonprofit corporate.	ooration.)		
(Date of Incorporation) (Date of Incorporation in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penulty liability.) 4114 BECK AVE STUDIO CITY, CA 91604 (Principal office street address) 4111 W ALAMEDA AVE BURBANK, CA 91505 (Current mailing address, if different) Spearhead diversity and inclusion in the entertainment industry. Supporting the production of various live event (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Barbara Scott Barbara Scott City Fort Myers (City) City Code) Carried agent and as registered agent and to accept service of process for the above stated corporation at the place exignated in this application. I hereby accept the appointment as registered agent and agree to act in this capacity. I with the provisions of all statutes relative to the proper and complete performance of my dutie and I am familiar with and accept the obligations of my position as registered agent.	(If name unav	railable in Florida, enter alternate co	rporate name adopted for the purpose of transacting	ng business in F	lorida)	
(Date of Incorporation) (Date of Incorporation) (Date of duration, if other than perpetual) (Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.) 4114 BECK AVE STUDIO CITY, CA 91604 (Principal office street address) 4111 W ALAMEDA AVE BURBANK, CA 91505 (Current mailing address, if different) Spearhead diversity and inclusion in the entertainment industry. Supporting the production of various live event (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Barbara Scott Barbara Scott Fort Myers (City) Fort Myers (City) Fort Myers (City) Fort Myers (City) City Code) Current mailing address, if different) Principal office street address of Florida in the state of Florida agent and to accept service of process for the above stated corporation at the place estignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I with the provisions of all statutes relative to the proper and complete performance of my dutter and I am familiar with and accept the obligations of my position as registered agent.	2. NEW YORK		₃ 27-0401325			
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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						
■Chairman	Jeff Friday Name:	□Chairman	Nicole Friday Name:			
□Vice Chairman	Address:	■ Vice Chairman	Address: 4114 Beck Ave Studio City, CA			
□Director		Director				
□President		□President				
□Vice President		□Vice President				
□Secretary	□Treasurer	□Secretary	□Treasurer			
Other:	Other:	□Other:	Other:			
☐ Chairman	Name:	□ Chairman	Name:			
□Vice Chairman	Address:	□Vice Chairman	Address:			
□Director		□Director				
□President		□President				
□Vice President		□Vice President				
□Secretary	□Treasurer	☐ Secretary	□Treasurer			
□Other:	Other:	□Other:	Other:			
□Chairman	Name:	□Chairman	Name:			
□Vice Chairman	Address:	□Vice Chairman	Address:			
□Director		Director				
□President		□President				
□Vice President		□Vice President				
☐ Secretary	□Treasurer	☐ Secretary	□Treasurer			
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.

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

STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

I, ROBERT J. RODRIGUEZ, Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

Entity Name: FILM LIFE FOUNDATION INC.

DOS ID Number: 3823714

Entity Type: DOMESTIC NOT-FOR-PROFIT CORPORATION

Entity Status: EXISTING

Date of Initial Filing with DOS: 06/18/2009

No information is available from this office regarding the financial condition, business activity or practices of this entity.



WITNESS my hand and official seal of the Department of State, at the City of Albany, on December 13, 2023 at 11:02 A.M.

ROBERT J. RODRIGUEZ, Secretary of State

Brandon C Hughen

By Brendan C. Hughes Executive Deputy Secretary of State

Authentication Number: 100004826017 To Verify the authenticity of this document you may access the Division of Corporation's Document Authentication Website at http://ecorp.dos.ny.gov