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(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only

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JUL - 8 2011

EXAMINER



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SECRETARY OF STATE OIVISION OF CORPORATION



# FLORIDA DEPARTMENT OF STATE Division of Corporations

June 21, 2011

DEREK HUDIBURG 407 SOUTH EDGEMON AVE. WINTER SPRINGS, FL 32708

SUBJECT: NEW GENERATION SERVICES LLC

Ref. Number: W11000033230

We have received your document for NEW GENERATION SERVICES LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

# Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The administratively dissolved entity with a similar name is NEW GENERATION SERVICE, INC. -- Document Number P06000056140.,

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) 245-6914.

Buck Kohr Regulatory Specialist II Letter Number: 811A00014954

www.sunbiz.org

# **COVER LETTER**

TO:

**Registration Section** 

Division	of Corporations	c,	2
	Concretion Comi	ICES Ited Liability Company	1
SUBJECT	Generation Serv	Ces //	
	Name of Lim	ited Liability Company	ئ
The enclosed Arti	cles of Organization and fee(s) are	submitted for filing.	•
Please return all co	orrespondence concerning this ma	tter to the following:	
Derek	Hudiburg		
DOIGN	Tradiburg	Name of Person	
		Firm/Company	
407 S	. Edgemon Ave.		
	. Eugemon Ave.	Address	,
1871	0 : 51 00700		
Winter	Springs, FL 32708	ty/State and Zip Code	
dbhudi@		ny/state and Zip Code	
<u> </u>	E-mail address: (to be used	for future annual report notification)	
For further inform	ation concerning this matter, pleas	se call:	
Derek Hudib	ura	407 000 0400	
	Name of Person	at (407 923-9420 Area Code & Daytime Telephone Number	
		The course say and to oppose than our	
Enclosed is a cho	eck for the following amount:		
\$125.00 Filing Fe	e \$\int_\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Status & Certified Copy (additional copy is enclosed)  \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FŁ 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

# Generation Services LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

### **ARTICLE 11 - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
Derek Hudiburg	Derek Hudiburg
407 S. Edgemon Ave.	407 S. Edgemon Ave.
Winter Springs, FL 32708	Winter Springs, FL 32708

### ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

	City State and Zin
Winter Springs	<sub>FL</sub> 32708
Florida	street address (P.O. Box NOT acceptable)
407 S. Edge	emon Ave.
	Name
Derek Hudiburg	

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

# **ARTICLE IV- Manager(s) or Managing Member(s):**

The name and address of each Manager or Managing Member is as follows:

"MGR" = Manager	
"MGRM" = Managing Member	
MGR	Derek Hudiburg
<del></del>	407 S. Edgemon Ave.
	Winter Springs, FL 32708
MGRM	Nicole Stagg
•	407 S. Edgemon Ave.
	Winter Springs, FL 32708
(Use attachment if necessary)	
	L. CCU (OPT
LE v: Ellective date, il other than the	ne date of filing: (OPT)
	be specific and cannot be more than five busines
days after the date of filing.)	
DECUMED SIGNATURE.	
REQUIRED SIGNATURE:	

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any 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.)

# Derek Hudiburg

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)