

F070000000356

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

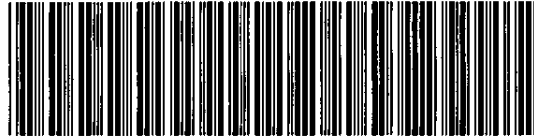
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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12/20/06--01002--013 **87.50

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2007 JAN 22 AM 8:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

26-54634

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: New HOMÉONS Group, 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," 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:

Yosvany Acosta
(Name of Person)
New HOMÉONS Group, Inc.
(Firm/Company)
815 NW 57 AVE #119
(Address)
Miami, FL 33126
(City/State and Zip code)

For further information concerning this matter, please call:

Yosvany Acosta at (305) 265-9330
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

New Filing 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 21, 2006

RECEIVED

06 DEC 29 AM 9:56

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

YOSVANY ACOSTA
NEW HORIZONS GROUP, INC.
815 NW 57 AVE - # 119
MIAMI, FL 33126

SUBJECT: NEW HORIZONS GROUP, INC.
Ref. Number: W06000054636

Upon receipt of your letter and/or check(s) totaling \$87.50, no document was found. Please return your check along with the proper form.

The attached form must be completed in order to file the document.

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is 102000000677 9NEW HORIZONS GROUP, LLC).

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) 245-6855.

Tammy Hampton
Document Specialist

Letter Number: 806A00072101



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 2, 2007

YOSVANY ACOSTA
NEW HORIZONS GROUP, INC.
815 NW 57 AVE - # 119
MIAMI, FL 33126

SUBJECT: NEW HORIZONS GROUP, INC. Cross Ref: NEW HORIZONZ
FINANCIAL GROUP, INC.
Ref. Number: W06000054636

We have received your document for NEW HORIZONS GROUP, INC. Cross
Ref: NEW HORIZONZ FINANCIAL GROUP, 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):

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
(850) 245-6855.

Tammy Hampton
Document Specialist

Letter Number: 707A00000084

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07 JAN 22 AM 11:39
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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. NEW HORIZONS GROUP, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

NEW HORIZONS Financial GROUP, Inc.
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. DELAWARE 3. 20-8014497
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 12/06/2006 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

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

7. 815 NW 57 AVE #119 Miami, FL 33126
(Principal office address)

815 NW 57 AVE #119 Miami, FL 33126
(Current mailing address)

8. Any and all lawfull business
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

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

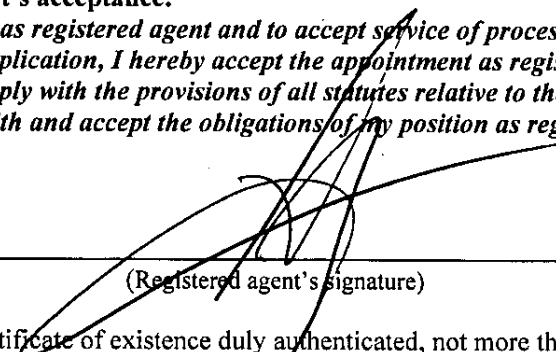
Name: Yosuary Acosta

Office Address: 1581 Brickell Ave #703

Miami, Florida 33129
(City) (Zip code)

10. 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)

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.

FILED
2007 JAN 22 AM 8:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman:

Yosvani Acosta

Address:

1581 BRICKELL AVE # 703

Miami, FL 33129

Vice Chairman:

Address:

Director:

Address:

Director:

Address:

B. OFFICERS

President:

Yosvani Acosta

Address:

1581 BRICKELL AVE # 703

Miami, FL 33129

Vice President:

Odalis Hidalgo

Address:

416 NW 58 AVE

Miami, FL 33126

Secretary:

Jorge L. Tabares JR.

Address:

815 NW 57 AVE #119 Miami, FL 33126.

Treasurer:

Address:

FILED
2007 JAN 22 AM 8:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

13.

(Signature of Director or Officer listed in number 12 of the application)

14.

Yosvani Acosta President.

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

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NEW HORIZONS GROUP INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE EIGHTEENTH DAY OF JANUARY, A.D. 2007.



4260742 8300

061167482

Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5363247

DATE: 01-18-07