

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850) 617-6381

From:

Account Name : CORPORATION SERVICE COMPANY  
Account Number : T20000000195  
Phone : (850) 521-1000  
Fax Number : (850) 558-1575

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**FOREIGN PROFIT/NONPROFIT CORPORATION  
NEW VENTURE CORPORATION, A TENNESSEE CORPORATION**

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 0       |
| Page Count            | 04      |
| Estimated Charge      | \$70.00 |

RECEIVED  
09 DEC 21 PM 4:29  
FILED  
09 DEC 21 AM 11:13  
SECRETARY OF STATE  
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 Venture Corporation

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

New Venture Corporation, a Tennessee Corporation

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Tennessee

(State or country under the law of which it is incorporated)

3. \_\_\_\_\_

(FEI number, if applicable)

4. 08/24/2005

(Date of incorporation)

5. perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. Upon Filing

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

7. 184 SW 131 Street, Newberry, FL 32669

(Principal office address)

184 SW 131 Street, Newberry, FL 32669

(Current mailing address)

8. any lawful 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: Tobias M. Sembower

Office Address: 184 SW 131 Street

Newberry

(City)

, Florida 32669

(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.

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

**A. DIRECTORS**

Chairman: Tobias M. Sembower

Address: 184 SW 131 Street

Newberry, FL 32669

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: Tobias M. Sembower

Address: 184 SW 131 Street

Newberry, FL 32669

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: Tobias M. Sembower

Address: 184 SW 131 Street, Newberry, FL 32669

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

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. Tobias M. Sembower, President

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

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**STATE OF TENNESSEE**  
**Tre Hargett, Secretary of State**  
Division of Business Services  
312 Rosa L. Parks Avenue  
6th Floor, William R. Snodgrass Tower  
Nashville, TN 37243

**CFS**  
8161 Hwy. 100, 172  
Nashville, TN 37221 USA

December 21, 2009

**Request Type: Certificate of Existence/Authorization**  
Request #: 0005150

Issuance Date: 12/21/2009  
Copies Requested: 1

**Document Receipt**

Receipt #: 32260

Filing Fee: \$20.00

Payment-Account - CFS, Nashville, TN

\$20.00

**Regarding: NEW VENTURE CORPORATION**

Filing Type: Corporation For-Profit - Domestic

Control #: 500861

Charter/Qualification Date: 08/24/2005

Date Formed: 08/24/2005

Status: Active

Jurisdiction: Williamson County

Duration Term: Perpetual

Inactive Date:

**CERTIFICATE OF EXISTENCE**

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that

**NEW VENTURE CORPORATION**

- \* is a Corporation duly incorporated under the law of this State with a date of incorporation and duration as given above;
- \* has paid all fees, taxes and penalties owed to this State which affect the existence/authorization of the business;
- \* has filed the most recent corporation annual report required with this office;
- \* has appointed a registered agent and registered office in this State;
- \* has not filed Articles of Dissolution or Articles of Termination.

*Tre Hargett*  
Tre Hargett, Secretary of State  
Business Services Division

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09 DEC 21 AM 11:35  
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