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(Cit	y/State/Zip/Phone	· #)
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Office Use Only



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SECHETARY OF STATE
TALLAHASSEE BORDA

COVER LETTER

TO:	New Filing Section Division of Corporations						
SHRII	ECT: LIFE BEGINS N	NOW, IN	C.				
5000			tion - must includ	de suffix			
Dear S	ir or Madam:						
"Certif	closed "Application by Foreign icate of Existence," or "Certificate referenced foreign corporation to	ate of Good S	Standing" and che	eck are submi			
Please	return all correspondence conce	ming this ma	atter to the follow	ing:			
Julie	A. Harris Coleman			· · · · · · · · · · · · · · · · · · ·			
		Name	of Person				
Life	Begins Now, Inc.						
		Firm/C	Company	•			
412	N. Pine Hills Road						
		A	ddress				
Orlai	ndo, FL 32811						
	<u> </u>	City/Sta	te and Zip code				
afrod	ncr1@aol.com						
		ess: (to be us	sed for future ann	ual report not	ification)		
For fur	ther information concerning this	s matter, plea	se call:				
Julie	A. Harris Coleman	at (407	, 860-91	91			
Name of Person Area Code & Daytime Telephone Number							
	STREET/COURIER ADDRES New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	ESS:	Ne Div P.C	AILING ADI w Filing Sectivision of Corp D. Box 6327 Ilahassee, FL	on orations		
Enclos	ed is a check for the following a	mount:					
✓ \$7		ling Fee & te of Status	\$78.75 Filin Certified C	_	\$87.50 Filing Fee, Certificate of Status & Certified Copy		

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.

		ame adopted for the purpose of transacting business in Florida)		
Nevac (State or country	under the law of which it is incorporated)	45-2766371 (FEI number, if applicable)		
July 1, 201	•	5. Perpetual		
	e of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")		
October 14	(Date first transacted busine	ess in Florida, if prior to registration) 07.1502, F.S., to determine penalty liability)		
412 N. Din	e Hills Rd, Orlando, FL 3281	4 4		
4 (Z N. FIII	e i iliis iku, Orianuo, i E 020	<u> </u>		
4 12 N. FIII	(Principal office			
	(Principal office e Hiolls Rd, Orlando, FL 3	address) 32811		
	(Principal office	address) 32811		
412 N. Pir	(Principal office ne Hiolls Rd, Orlando, FL 3 (Current mailing	address) 32811		
412 N. Pir	(Principal office ne Hiolls Rd, Orlando, FL 3 (Current mailing	address) 32811		
412 N. Pir	(Principal office ne Hiolls Rd, Orlando, FL 3 (Current mailing	address) 32811 gaddress) or country to be carried out in state of Florida) (P.O. Box NOT acceptable)		
412 N. Pir	(Principal office ne Hiolls Rd, Orlando, FL 3 (Current mailing ning s) of corporation authorized in home state of	address) 32811 g address) or country to be carried out in state of Florida)		
Life Coacl (Purpose) Name and stre	(Principal office ne Hiolls Rd, Orlando, FL 3 (Current mailing ning s) of corporation authorized in home state of et address of Florida registered agent:	address) 32811 gaddress) or country to be carried out in state of Florida) (P.O. Box NOT acceptable)		
Life Coacl (Purpose)	(Principal office ne Hiolls Rd, Orlando, FL 3 (Current mailing ning s) of corporation authorized in home state of et address of Florida registered agent: Julie A. Harris Coleman	address) 32811 gaddress) or country to be carried out in state of Florida) (P.O. Box NOT acceptable)		

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.

12. Names and business addresses of officers and/or directors:	AVI		
A. DIRECTORS	MLED		
Chairman: Julie A. Harris Coleman	11 NOV -9 PH 4: 21		
Address: 412 N. Pine Hills Rd	SECRETARY OF COM		
Orlando, FL 32811	IALLAHASSEE FLORIDA		
Vice Chairman:			
Address:			
Director:			
Address:			
Director:			
Address:			
B. OFFICERS			
President: Julie A. Harris Coleman			
Address: 412 N. Pine Hills Rd			
Orlando, FL 32811			
Vice President:			
Address:			
Secretary: Julie A. Harris Coleman			
Address: Same as above			
Treasurer: Julie A. Harris Coleman			
Address: Same as above			
NOTE: If necessary you may attach an addendum to the application listing a	dditional officers and/or directors.		

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that 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.

14. Julie A. Harris Coleman, President



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify; that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the New Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **LIFE BEGINS NOW, INC**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since July 1, 2011, and is in good standing in this state.



Electronic Certificate
Certificate Number: C20111013-2251
You may verify this electronic certificate
online at http://www.nvsos.gov/

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on October 13, 2011.

ROSS MILLER Secretary of State 11 NOV -9 PH 4: 25

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