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PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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12 JAN 18 PH 3: 33
SECRETARY OF STATE

MRD/12

COVER LETTER

TO: New Filing Section Division of Corporations			
SUBJECT: Newborn Consulting, Inc.			
Name of corporation - must include	suffix		
Dear Sir or Madam:			
The enclosed "Application by Foreign Corporation for Authorization to "Certificate of Existence," or "Certificate of Good Standing" and check above referenced foreign corporation to transact business in Florida.			
Please return all correspondence concerning this matter to the following	g.		
Stacey Savige			
Name of Person			
Newborn Consulting, Inc.			
Firm/Company			
5010 W. Carmen St			
Address			
Tampa, FL 33609			
City/State and Zip code			
stacey33600@gmail.com			
E-mail address: (to be used for future annua	report notification)		
For further information concerning this matter, please call:			
Amber Duncan at (813) 864.4718	864.4718		
Name of Person Area Code & Daytime Telephone Number			
New Filing SectionNew IDivision of CorporationsDivisClifton BuildingP.O. I	LING ADDRESS: Filing Section ion of Corporations Box 6327 nassee, FL 32314		
\$70.00 Filing Fee \$\sum \text{S78.75 Filing Fee & Certificate of Status}\$\$ Certified Cop.	1 1		



PACE PARE

12 JAN 18 PH 12: 29

SECRETARY OF STATE TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE Division of Corporations

January 12, 2012

STACEY SAVIGE NEWBORN CONSULTING, INC. 5010 W. CARMEN ST TAMPA, FL 33609

SUBJECT: NEWBORN CONSULTING, INC.

Ref. Number: W12000002329

We have received your document for NEWBORN CONSULTING, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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.

If you have any questions concerning the filing of your document, please call (850) 245-6879.

Ruby Dunlap Regulatory Specialist II

Letter Number: 612A00000900

اد:

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

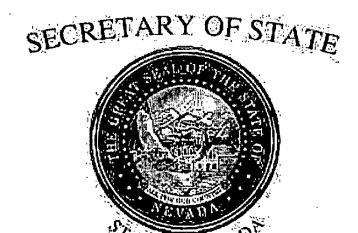
IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

(If name unaveil	able in Claside autorale anno 1		as business in Florida
	able in Florida, enter alternate corporate	name adopted for the purpose of transacting	ng business in Florida)
2. Nevada		_3. <u>26-3989309</u>	<u> </u>
•	under the law of which it is incorporated	(FEI number, if app	licable)
4. 1/7/2009		5. perpetual	
(Date	e of incorporation)	(Duration: Year corp. will cease to	o exist or "perpetual")
6. <u>·</u>	(Data first transacted burn	ness in Florida, if prior to registration)	
		ness in Florida, if prior to registration) 607.1502, F.S., to determine penalty liabili	ity)
_{7.} 5010 W Ca	irmen St., Tampa FL 3360	9	
/·	(Principal offic		
5010 W C	armen St. Tampa FL 336	09	
•	(Current mailin		
	,		
8. any lawful	purpose		1
· · · · · · · · · · · · · · · · · · ·	'	e or country to be carried out in state of Flo	orida)
(Purpose(s	'	•	
(Purpose(s	s) of corporation authorized in home state et address of Florida registered agent:	•	
(Purpose(s	s) of corporation authorized in home state et address of Florida registered agent: Stacey Savige	•	
9. Name and street Name:	s) of corporation authorized in home state et address of Florida registered agent:	•	
9. Name and street Name:	s) of corporation authorized in home state et address of Florida registered agent: Stacey Savige	(P.O. Box <u>NOT</u> acceptable)	
9. Name and street Name:	s) of corporation authorized in home state et address of Florida registered agent: Stacey Savige 5010 W. Carmen St	•	
(Purpose(s 9. Name and stree Name: Office Address:	s) of corporation authorized in home state et address of Florida registered agent: Stacey Savige 5010 W. Carmen St Tampa (City)	(P.O. Box NOT acceptable) , Florida 33609	12 JAI TALLA
(Purpose(s) 9. Name and street Name: Office Address: 10. Registered as Having been name	s) of corporation authorized in home state et address of Florida registered agent: Stacey Savige 5010 W. Carmen St Tampa (City) gent's acceptance: led as registered agent and to accept	(P.O. Box NOT acceptable) , Florida 33609 (Zip code) service of process for the above stated	12 JAN 18 PH 3: 33 SECRETARY OF STATE AT the place
(Purpose(s) 9. Name and stree Name: Office Address: 10. Registered as Having been namedesignated in this	s) of corporation authorized in home state et address of Florida registered agent: Stacey Savige 5010 W. Carmen St Tampa (City) gent's acceptance: led as registered agent and to accept application, I hereby accept the app	(P.O. Box NOT acceptable) , Florida 33609 (Zip code) service of process for the above stateation of the state and agree and agree and agree and agree and agree and agree agree and agree and agree agree agree and agree ag	SECRETARY OF STATE STATE And ASSEE, FLORIDA at the place of the to act in this capacity. I
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(Purpose(s) 9. Name and street Name: Office Address: 10. Registered as Having been name designated in this further agree to c	s) of corporation authorized in home state et address of Florida registered agent: Stacey Savige 5010 W. Carmen St Tampa (City) gent's acceptance: ned as registered agent and to accept application, I hereby accept the apponply with the provisions of all state	(P.O. Box NOT acceptable) , Florida 33609 (Zip code) service of process for the above stated ointment as registered agent and agreates relative to the proper and complete	SECRETARY OF STATE STATE And ASSEE, FLORIDA at the place of the to act in this capacity. I

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:	FILES	
A. DIRECTORS	FILED	
Chairman:	12 JAN 18 PM 3: 33	
Address:	SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Vice Chairman:		
Address:		
Director: Amber Duncan		
Address: 5010 W. Carmen St.		
Tampa FI 33609		
Director:		
Address:		
B. OFFICERS President: Amber Duncan		
Address 5010 W Carmen St		
Tampa, FL 33609		
Vice President:		
Address:		
Secretary:		
Address:		
Treasurer:		
Address:		
NOTE: If necessary, you may attach an addendum to the application listing		
Signature of Director or Office The officer or director signing this document (and who is listed in number are true and that he or she is aware that false information submitted in a dotthird degree felony as provided for in s.817.155, F.S.	12 above) affirms that the facts stated herein	

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





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 Nevada 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, **NEWBORN CONSULTING, 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 January 7, 2009, and is in good standing in this state.

S AVADA

Electronic Certificate
Certificate Number: C20120117-1280
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 January 17, 2012.

ROSS MILLER Secretary of State