

LO30000010390

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

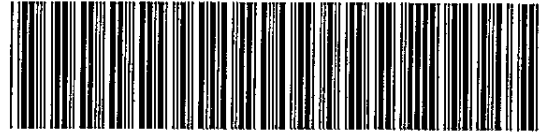
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
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DATE 03/21/03 BY 1040012

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3-24-03

TRANSMITTAL LETTER

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

SUBJECT: New Life Housing, LLC

Enclosed is an original and one (1) copy.

Filing fee for articles of organization of Florida Limited Liability Company:

\$ 100.00 Filing fee for Articles of Organization
\$ 25.00 Designation of Registered Agent

A letter of acknowledgement will be issued free of charge upon filing. Please submit an additional \$5 if a certificate of status is needed. The fee for a certified copy is \$30. Please send one check for the total amount made payable to the Florida Department of State.

FROM: Joseph W. Evich
2296 Habersham Dr.
Clearwater, FL 33764
727-698-0295

03 MAR 20 AM 9:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AND
FILED

**ARTICLES OF ORGANIZATION FOR FLORIDA
LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

New Life Housing, LLC

ARTICLE II – Address:

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

2296 Habersham Dr.
Clearwater Florida, 33764

ARTICLE III – Registered Agent:

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

Joseph W. Evich
2296 Habersham Dr.
Clearwater Florida, 33764

ARTICLE IV - Management:

The Limited Liability Company is initially to be managed by the members.



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

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

Joseph W. Evich

Name of signee

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is:

New Life Housing, LLC

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

Joseph W. Evich

NAME

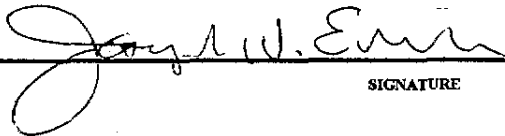
2296 Habersham Dr.

Florida street address (P.O. Box **NOT** ACCEPTABLE)

Clearwater, FL 33764

CITY, STATE AND ZIP

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 proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


SIGNATURE

03 MAR 20 AM 9:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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