

L060000061980

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

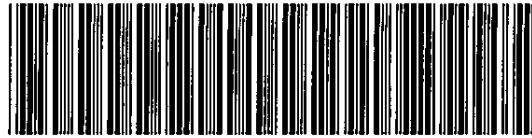
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Robert _____ GAVE
AUTHORIZATION BY PHONE TO
CORRECT corp name (suffix)
DATE 6/19/06
DOC. EXAM Bm

Office Use Only



500075660085

06/02/06--01044--009 **125.00

EFFECTIVE DATE
06-01-06

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 JUN -2 AM 11:28

W06-26300

B. McKnight JUN 19 2006

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: New Beginnings Ltd. LC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Robert E. Stilley
(Name of Person)

New Beginnings Ltd. LC
(Firm/Company)

2294 Belgian Lane
(Address)

Clearwater, FL 33763
(City/State and Zip Code)

For further information concerning this matter, please call:

Robert Stilley at (727) 515-8537
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 8, 2006

ROBERT E STILLEY
2294 BELGIAN LANE
CLEARWATER, FL 33763

SUBJECT: NEW BEGINNINGS LTD. LC
Ref. Number: W06000026300

We have received your document for NEW BEGINNINGS LTD. LC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "Limited Company" or Limited Liability Company or with one of the following abbreviations Ltd. Co., LC, "L.C.," LLC, or L.L.C.

The suffix Ltd. LC is not an acceptable suffix.

Please return the original and one copy of 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) 245-6931.

Becky McKnight
Document Specialist
New Filing Section

Letter Number: 206A00039533

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

EFFECTIVE DATE

06-01-06

New Beginnings LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

2294 Belgian Lane #38
Clearwater FL 33763

% 2294 Belgian Lane #38
Clearwater FL 33763

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Robert E. Stille

Name

2294 Belgian Lane #38

Florida street address (P.O. Box NOT acceptable)

Clearwater FL 33763

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 capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Robert E. Stille

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 JUN -2 AM 11:28

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

MGRM

Name and Address:

Robert E. Stilley
2294 Belgian Lane #38
Clearwater FL 33763

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 6/1/06 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

Robert E. Stilley
Signature of a member or an authorized representative of a member.

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

Robert E. Stilley
Typed or printed name of signee

Filing Fees:

- ✓ \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 JUN -2 AM 11:28