

LD7000103862

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

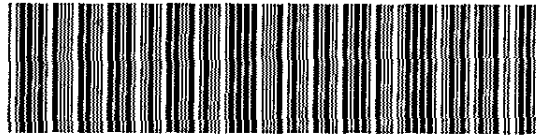
Special Instructions to Filing Officer:

DB

Office Use Only

EFFECTIVE DATE

10-8-07



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09/24/07--01070--008 **155.00

FILED

07 OCT 11 PM 12:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: My Business of Being Alive LLC
(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:

JENNIFER EIR IRVIN
(Name of Person)

My Business of Being Alive LLC
(Firm/Company)

2705 TREMONT DRIVE
(Address)

EUSTIS FLORIDA 32726-2000
(City/State and Zip Code)

For further information concerning this matter, please call:

JENNIFER EIR IRVIN at (352) 383-2175
(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

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OCT 11 PM 12:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 2, 2007

MY BUSINESS OF BEING ALIVE LLC
2705 TREMONT DRIVE
EUSTIS, FL 32726 US

SUBJECT: MY BUSINESS OF BEING ALIVE LLC
Ref. Number: L06000098168

FILED
07 OCT 11 PM 12:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for MY BUSINESS OF BEING ALIVE LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above referenced entity was voluntarily dissolved. There is no provision in the Florida Statutes for reinstating a voluntarily dissolved entity. Therefore, we are returning your reinstatement along with the forms and instructions for you to form a new entity.

Please return 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) 245-6984.

Deborah Bruce
Regulatory Specialist II

Letter Number: 507A00057329

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

MY Business of Being Alive LLC
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

2705 TREMONT DRIVE
EUSTIS, FLORIDA
32726-2000

Mailing Address:

2705 TREMONT DRIVE
EUSTIS, FLORIDA
32726-2000

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:

JENNIFER EIR IRVIN
Name

2705 TREMONT DRIVE
Florida street address (P.O. Box **NOT** acceptable)

EUSTIS FL 32726-2000
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.

Jennifer Eir Irvin
Registered Agent's Signature (REQUIRED)

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OCT 11 PM 12:44
CLERK OF STATE
TALLAHASSEE, FLORIDA

EFFECTIVE DATE 10-8-07

(CONTINUED)

Page 1 of 2

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

Name and Address:

Single MGR

JENNIFER EIR IRVIN
2705 TREMONT DRIVE
EUSTIS, FLORIDA 32726-
2000

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: October 8, 2007. (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:

Jennifer Eir Irvin

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.)

JENNIFER EIR IRVIN

Typed or printed name of signee

07 OCT 11 PM 12:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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)