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**EXAMINER** 



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SECRETARY OF STATE OF

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Lifeline Carching International (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:
John Laus (Name of Person)
Lifeline Coaching International (FirmCompany)
200 Marine Way (Address)
Delray Beach, FL 33483 (City/State and Zip Code)
For further information concerning this matter, please call:
Virginia Rebata at (561) 573-1900 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\times \text{S130.00 Filing Fee & Certificate of Status}\$\$ Certificate of Status \$\times \text{Certified Copy (additional copy is enclosed)}\$\$ Certified Copy (additional copy is enclosed)
Mailing Address  Registration Section  Right of Compositions  Street/Courier Address  Registration Section  Division of Compositions

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

(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:	Mailing Address:		
ARTICLE III - Registered Agent, Registered C (The Limited Liability Company cannot serve as its own Registered business entity with an active Florida registration.)			
The name and the Florida street address of the reg	beta - OFF		
Florida street addre  De Iray Beach  City, State, and	ss (P.O. Box NOT acceptable)  FL 33483  1 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..

Registered Agent's Signature (REQUIRED)

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

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

Title:	Name and Address:
<ul><li>"MGR" = Manager</li><li>"MGRM" = Managing Member</li></ul>	
MGRM	John Laus 200 Marine Way. Desray Beach, Pd 33483
MGRM	Virginia Rebata 2200 S. Diean Blud. #707 Delray Beach, FL 33483
(Use attachment if necessary)  ARTICLE V: Effective date, if other than the control of the contr	he date of filing: Tuly 1, 2008. (OPTIONAL) be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	
Signature of a mem	ber or an authorized representative of a member.
(In accordance with	section 608.408(3), Florida Statutes, the execution astitutes an affirmation under the penalties of perjury
Virgi	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)