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(Requestor's Name)					
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S. HAWKES

SEP 1-8 7009

EXAMINER

COVER LETTER

TO:

Registration Section

Division	of Corporations				
SUBJECT:	SUBJECT: New World Unlimite4d				
	Name of Limited Liability Company				
Dear Sir or Madam	ı:				
The enclosed Artic	les of Correction and fee(s) are submitted for filing	, .			
Please return all co	rrespondence concerning this matter to the following	ng:			
	Chris Rivera				
	Name of Person	_			
	New World Unlimited	_			
	Firm/Company				
	204 thornbush parkway Address	_			
	Davenport, FI 33837 City/State and Zip Code	_			
rive E-mail addres	ra_investments@yahoo.com s: (to be used for future annual report notification)	-			
For further informa	tion concerning this matter, please call:				
	Chris Rivera at (917 ame of Person Area Co	627-1447			
STREET/COURII Registration Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, Florida	ER ADDRESS: nations nter Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enclosed is a check	k for the following amount:				
\$25 Filing Fee	\$30 Filing Fee & Status S55 Filing Fee & Certificate of Status	\$60 Filing Fee, Certificate of Status & Certified Copy			
CR2E062 (08/05)					

	•	ARTICLES OF CO FOR FLORIDA OR FOREIGN LIMITE		
	ess days t		peing submitted within the required 30 inization or application to transact business.	OSER 17 MILLS
FIRST	<u>r</u> : 1	he name of the limited liability comp New World L	pany is: Jnlimite4d	変異的
SECO	<u>)ND</u> : 7	The articles of organization or the app	lication to transact business	1000
<u>(CI</u>	<u>IECK TH</u>	E APPROPRIATE BOX AND COMP	LETE THE APPLICABLE STATEMENT	77
		s an incorrect statement. The incorrect, and the corrected statement are as for	et statement, the reason the statement is ollows:	
		of LLC was typed incorrectly. Curre	ently listed as "New World Unlimite4d World Unlimited LLC"	
		ectively signed. The manner in which opriate correction are as follows:	the document was defectively signed and	
Dated:		September 9 Signature of a member or authorized Chris Rive	era ne of signee	
		Filing Fee: Certified Copy:	\$25.00 \$30.00 (optional)	