

LO9000116982

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

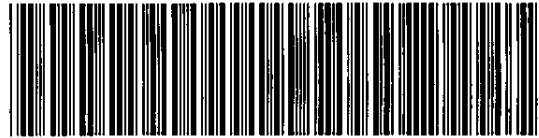
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

DEC 9 2009

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EXALTED LIFE INTERNATIONAL
(Name of Limited Liability Company) OUTREACH PROGRAM LLC.

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

Please return all correspondence concerning this matter to the following:

(LADY ANN)
ANNESTA BOLLERS-SEARS
(Name of Person)

EXALTED LIFE INTERNATIONAL OUTREACH PROGRAM LLC.
(Firm/Company)

2140 C WHITEPINE CIRCLE
(Address)

WEST PALM BEACH. FL. 33415
(City/State and Zip Code)

For further information concerning this matter, please call:

(LADY ANN)
ANNESTA SEARS at (561) 385-5410
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount: CHECK # 1518

- ☐ \$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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SECRETARY OF STATE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

EXALTED LIFE INTERNATIONAL OUTREACH
(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,") PROGRAM
LLC.

ARTICLE II - Address:

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

Principal Office Address:

2140C WHITEPINE CIRCLE.
WEST PALM BEACH.
FL. 33415.

Mailing Address:

P.O BOX 21211
WEST PALM BEACH.
FL. 33416.

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:

ANNESTA SEARS
Name

2140C WHITEPINE CIR.
Florida street address (P.O. Box NOT acceptable)
WEST PALM BEACH FL 33415.
City, State, and Zip

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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..

Annesta Sears
Registered Agent's Signature (REQUIRED)

(CONTINUED)

EFFECTIVE DATE 1/01/2010

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:

MARK SEARS
MGRM

6862 MILLBROOK PL.
LAKE WORTH
FL. 33463

MICHAEL SEARS
MGRM

4310 EDWARDS ROAD
WEST PALM BEACH
FL. 33406

DELLON SEARS
MGRM

4200 COMMUNITY DR
SUITE. 2001
WEST PALM BEACH FL. 33409

AMANDA BOLLERS
MANAGER

1316 GILFORD POINT LANE
CHAMPIONS GATE
FL. 33896

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: JANUARY 1ST. 2010. (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:

Annesta B. Sears
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.)

ANNESTA B. SEARS
Typed or printed name of signee

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TALLAHASSEE, FLORIDA

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)