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(Requestor's Name)

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TALLAHASSEE, FLORIDA

D. BRUCE

JAN 26 2010

EXAMINER

From: Ingrid Christensen
26150 S.W. 192nd Avenue
Miami, FL 33031
(305) 546-2483

To: Florida Department of State
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

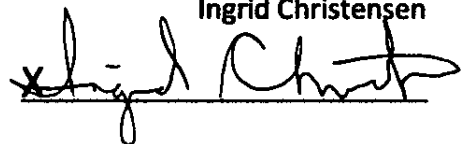
January 21st, 2010

Request to register New Folder Design as a LLC.

The following attached documents are the completed forms to request register of New Folder Design as a Limited Liability Company as per request of Chapter 608, Florida Statutes. Additionally enclosed is payment for Filing Fees and the Certificate of Status with check # 1142 written to the Florida Department of State and totaling \$130.00.

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TALLAHASSEE, FLORIDA

Thank you,
Ingrid Christensen

A handwritten signature in black ink, appearing to read "Ingrid Christensen", written over a horizontal line.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: New Folder Design, 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:

Ingrid Christensen
Name of Person

New Folder Design, LLC.
Firm/Company

26150 SW 192nd Ave.
Address

Miami, FL 33031
City/State and Zip Code

ingrid@newfolderdesign.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ingrid Christensen at (305) 546-2483
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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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

New Folder Design, 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:

26150 SW 192nd Ave.

Miami, FL 33031

Mailing Address:

26150 SW 192nd Ave.

Miami, FL 33031

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:

Ingrid Christensen

Name

26150 SW 192nd Ave.

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

Miami, FL 33031

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..



Registered Agent's Signature (REQUIRED)

(CONTINUED)

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:

MGR

Ingrid Christensen

26150 SW 192nd Ave.

Miami, FL 33031

MGR

Destin Porch

18775 SW 238th St

Miami, FL 33031

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (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:



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.)

Ingrid Christensen

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)

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