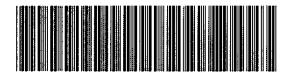
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(Requestor's Name)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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SECRETARY OF STATE

J. BRYAN

JUN 21 2011

EXAMINER

COVER LETTER

TO:

Registration Section

Division of Corporations			
SUBJECT: New Leaf Home	e Renovations, l	LLC	
Na Na	me of Limited Liability Co	ompany	
The enclosed Articles of Organization an	nd fee(s) are submitted for f	āling.	,,,
Please return all correspondence concern	ing this matter to the follow	wing:	·
Tina Ring			20 2
111011119	Name of Person	n	75 6
			題る「
New Leaf Home Re			55.0
	Firm/Company	7	· · · · · · · · · · · · · · · · · · ·
14055 Eylewood Dr	ive		THETARKE, FLOR
11000 Eyioweda B.	Address		
Winter Garden, FL 34			
	City/State and Zip C	Code	
ringt68@yahoo.com			
E-mail address	s: (to be used for future annual	report notification)	
For further information concerning this n	natter, please call:		
Tina Ring	407	405 6092	
Name of Person	at (_407	405-6982 Code & Daytime Tele	enhane Number
Name of Ferson	Alta	Sode & Daytime Tele	phone (Value)
Enclosed is a check for the following	amount:		
\$125.00 Filing Fee \$130.00 Filin	—	Filing Fee &	\$160.00 Filing Fee,
Certificate o			Certificate of Status &
		copy is enclosed)	Certified Copy
			(additional copy is enclosed)
Mailing Addr	ess Stree	et/Courier Address	
Registration So	ection Regis	stration Section	
Division of Co P.O. Box 632		sion of Corporations on Building	s
Tallahassee, F		Executive Center (Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY **ARTICLE I - Name:** The name of the Limited Liability Company is: New Leaf Home Renovations, 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: Mailing Address:** 14055 Eylewood Drive 14055 Eylewood Drive Winter Garden, FL 34787 Winter Garden, FL 34787 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: Tina Ring Name 14055 Eylewood Drive Florida street address (P.O. Box NOT acceptable) FL 34787 City, State, and Zip Winter Garden, Having been named as registered agent and to accept service of process for the above stated limited

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 (FEQUIRED)

(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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Tina Ring 14055 Eylewood Drive Winter Garden, FL 34787
	
(Use attachment if necessary) ICLE V: Effective date, if other than the effective date is listed, the date must be days after the date of filing.)	e date of filing: (OPTIONAL) be specific and cannot be more than five business days pri
REQUIRED SIGNATURE:	
Signature of a memb	Jua Lua er or an authorized representative of a member.
constitutes an affirmation under lam aware that any false infor	18.408(3), Florida Statutes, the execution of this document er the penalties of perjury that the facts stated herein are true. Trination submitted in a document to the Department of State are as provided for in \$ 817,155, F.S.)

Tina Ring 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)