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**EXAMINER** 

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SECRETARY OF STATE
ALL AHASSEE, FLORIDA

## **COVER LETTER**

TO: Registratio Division of	n Section Corporations		į.
SURJECT: Cen	ter for Oneness, Ll	LC	
		ed Liability Company	
77% 1 1 1 4 1	60 16 ()	1 16	
	s of Organization and fee(s) are	_	
Please return all corr	espondence concerning this mat	ter to the following:	
Debora	h Jeanne Neff		
		Name of Person	
<del> </del>		Firm/Company	
9278 E	ast River Drive		
		Address	
Navarro	FL 32566		
inavaire,		y/State and Zip Code	
Deborah	NeffLMT@gmail.com		
•	E-mail address: (to be used to	for future annual report notification)	
For further informati	on concerning this matter, please	e call:	
Deborah Neff		at (850 ) 499-2108	
Na	me of Person	Area Code & Daytime Telephone	Number
Enclosed is a check	c for the following amount:		
<b>\$125.00</b> Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Copy Cer (additional copy is enclosed) Cer	0.00 Filing Fee, tificate of Status & tified Copy · itional 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	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
Center for Oneness, LLC		
(Must end with the words "Limited Liabili	ty Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Li	ability Company is:
Principal Office Address:	Mailing Address:	
7552 Navarre Parkway	9278 East River Drive	
Harvest Village, Suite # 44	Navarre, FL 32566	
Navarre, FL 32566		
business entity with an active Florida registration.)  The name and the Florida street address of the repeated by the property of the property		
9278 East River I	<del></del>	
Navarre	ress (P.O. Box <u>NOT</u> acceptable)	•
	FL 32300 ite, and Zip	
Having been named as registered agent and to a liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per accept the obligations of my position as registered Agent's Signature.	his certificate, I hereby accept the I further agree to comply with informance of my duties, and I and tered agent as provided for in C	the appointment as the provisions of all in familiar with and Chapter 608, F.S  TALLAHASSE
(CONTIN	U <b>ED)</b>	

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:

"MGR" = Manager "MGRM" = Managing Memi	her
MGR	Deborah Jeanne Neff
	9278 East River Drive
	Navarre, FL 32566
	<del></del>
/III	
(Use attachment if necessary)	)
LE V: Effective date, if other	than the date of filing: (OPTION)
fective date is listed, the date days after the date of filing.)	e must be specific and cannot be more than five business day
,	

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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

#### Deborah Jeanne Neff

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)