

L12000093860

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800236607178

06/22/12--01019--003 \*\*125.00

FILED  
2012 JUL 19, AM 8:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

W12-

J. BRYAN

JUL 20 2012

EXAMINER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 28, 2012

DEMARCO HENDERSON  
2125 LA DUE COURT  
ORLANDO, FL 32811

SUBJECT: REDEMPTIVE LIFE CHRISTIAN MINISTRIES, LLC  
Ref. Number: W12000034679

FILED  
2012 JUL 19 AM 8:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

We have received your document for REDEMPTIVE LIFE CHRISTIAN MINISTRIES, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable because it is the same as or not distinguishable from an existing entity. If the principals are the same in both entities, please send a letter or affidavit advising us of this association, along with your articles so that we may complete the filing process.

The document number of the name conflict is #N12000006227, REDEMPTIVE LIFE CHRISTIAN MINISTRIES, INC..

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Joey Bryan  
Regulatory Specialist II

Letter Number: 312A00017621

Detail by Entity Name

Rejected Filing:

REDEMPTIVE LIFE CHRISTIAN MINISTRIES, LLC

Filing Information

Document Number W12000034679

State NO

Filed Date 06/28/2012

Expire At Usual Time Y

Time Period days

Penalty Fee 0.00

Associated Document Number

Document Type

Submitted By DEMARCO HENDERSON

2125 LA DUE COURT  
ORLANDO, FL 32811

FILED  
2012 JUL 19 AM 8:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Note to the  
Div. of Corporations:

Please be advised that this LLC (Redemptive Life Christian Ministries, LLC) was rejected. The attached has a new name for a new filing. The filing fee was already paid under document # W12000034679.

Respectfully,  
Demarco Henderson

## COVER LETTER

TO: **Registration Section**  
**Division of Corporations**

SUBJECT: Demarco Henderson Ministries, 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:

Demarco Henderson Sr.

Name of Person

Firm/Company

2125 La Due Ct.

Address

Orlando, FL 32811

City/State and Zip Code

redemptivelifefla@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Demarco Henderson, Sr,

Name of Person

at ( 757 ) 724-7499

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)

already paid &  
submitted  
Please see  
document #  
W12000034679

**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

FILED  
2012 JUL 19 AM 8:40  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

**Demarco Henderson Ministries, 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:**

2125 La Due Ct.  
Orlando, FL 32811

**Mailing Address:**

2125 La Due Ct.  
Orlando, FL 32811

**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:

Demarco Henderson, Sr.

Name

2125 La Due Ct.

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

Orlando

FL 32811

City, State, and Zip

*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..*

Demarco Henderson Sr.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

FILED  
2012 JUL 19 AM 8:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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

Demarco Henderson, Sr.

2125 La Due Ct.

Orlando, FL 32811

2012 JUL 19 AM 8:40  
FILED  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

(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. 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.)

Demarco Henderson, Sr.

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)**