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(Re	equestor's Name)
(Ac	ddress)
(Ac	ddress)
(C	ity/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Bo	usiness Entity Name)
(De	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
	W13-44866

Office Use Only



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SECRETARY OF STATE
TAIL AHASSEE F. CARE

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D. BRUCE



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 12, 2013

CLIFTON C. CURRY, JR. CURRY LAW GROUP.COM 750 W. LUMSDEN RD BRANDON, FL 33511

SUBJECT: BY FAITH ENTERPRISES

Ref. Number: W13000044866

We have received your document for BY FAITH ENTERPRISES and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a limited liability company must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The word "Limited" may be abbreviated as "Ltd." and the word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." Please amend your document accordingly.

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

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Regulatory Specialist II lease call

Letter Number: 113A00019255

www.sunbiz.org

COVER LETTER

TO:

Registration Section

Division of Corporations	
SUBJECT: BY FAITH ENTERPRI	SES
	ted Liability Company
The enclosed Articles of Organization and fee(s) are	submitted for filing.
Please return all correspondence concerning this ma	tter to the following:
CLIFTON C. CURRY, JF	
CLII TON C. CONT. 31	Name of Person
CURRY LAW GROUP.CO	OM
	Firm/Company
750 W. LUMSDEN RD.	
	Address
BRANDON FLORIDA 33511	
	ity/State and Zip Code
MICHELLE.FILIPOWICZM@CU E-mail address: (to be used	for future annual report notification)
For further information concerning this matter, pleas	se call:
CLIFTON C. CURRY, JR	at (813) 653-2500
Name of Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:	AEC SEC
\$125.00 Filing Fee \$\int \\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) 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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

DV EATH ENTERDRICES 110		
BY FAITH ENTERPRISES, LLC (Must end with the words "Limited L	Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of th		oility Company is:
Principal Office Address:	Mailing Address:	
123 Kings Ave	123 Kings Ave	
Brandon, Florida 33510	Brandon, Florida	
Clifton C. Curry, Jr. Esquire No. 750 W Lumsden Rd	ame	2013 SEP -5 P SECRETARY OF AULAHASSEE
	et address (P.O. Box NOT acceptable)	ru
Brandon Fl 33511	FL	STATE
City	y, State, and Zip	3
Having been named as registered agent and liability company at the place designated registered agent and agree to act in this ca all statutes relating to the proper and com and accept the obligations of my position of	l in this certificate, I hereby accept the apacity. I further agree to comply with aplete performance of my duties, and I	e appointment as h the provisions of I am familiar with

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:

MGRM	NELSON FIGUEROA
	123 N KINGS AVE
	BRANDON FL 33510
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	SECRE AH
	<i>™</i> ≥
	(a)
	<u> </u>
(Use attachment if necessary)	
LE V: Effective date, if other tha	n the date of filing: (OPTIONA

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.)

CLIFTON C. CURRY, JR

Typed or printed name of signee

Filing Fees:

REQUIRED SIGNATURE:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)