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(Re	equestor's Name)	
(Ac	idress)	
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(Či	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL .
(Bi	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



200259943002

05/09/14--01020--008 **130.00

5-28-14

FILED 14 JUN-2 PH 3: C SECRE JARY OF STALL

"JUN = 9 2014 T. BROWN

COVER LETTER

Division of Corporations	
SUBJECT: PLANNING 4 LIFE NOW, L.L.C 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:	
LUIS FORTUN Name of Person	
Firm/Company	
4318 SW 130TH AVE Address	
DAVIE, FL 33330 City/State and Zip Code	
NFORTUN22@GMAIL.COM E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
LUIS FORTUN at (954) 770-1533 Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount: This amount was pulviously	sent.
\$125.00 Filing Fee Status Stat	

Mailing Address

TO:

Registration Section

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

LUIS FORTUN 4318 SW 130TH AVE DAVIE, FL 33330 954-770-1533

RE: ARTICLES OF INCORPORATION

RE: PLANNING 4 LIFE NOW, LLC

Dear Sir/Madam:

I have previously sent a check together with an application to register my LLC. Planning 4 Life,

LLC this was rejected because it was similar to another entity.

The check was NOT returned with the corrections I needed to make.

Please see attached the new application with the new name; Planning 4 Life Now, LLC

unis Fortun



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 15, 2014¹

LUIS FORTUN PLANNING 4 LIFE, LLC 4318 SW 130TH AVE DAVIE, FL 33330

SUBJECT: PLANNING 4 LIFE, LLC Ref. Number: W14000030995

We have received your document for PLANNING 4 LIFE, LLC and your check(s) totaling \$130.00. 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 since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

The document number of the name conflict is p12000065251.

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.

Teresa Brown Regulatory Specialist II

Letter Number: 014A00010526

EFFECTIVE DATE 5-28-14

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	TALLAHASSE P
The name of the Limited Liability Company is:	
PLANNING 4 LIFE NOW L.L.C	Liability Company, "L.L.C.," or "LLC.")
(Must end with the words "Limited	Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	SE C
The mailing address and street address of the principal of	fice of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
4318 SW 130TH AVE	4318 SW 130TH AVE
DAVIE, FL 33330	DAVIE, FL 33330
The name and the Florida street address of the registered LUIS FORTUN Name	agent are:
4318 SW 130TH AVE Florida street address (P.O. Box	NOT acceptable
riolida sueet address (r.O. Box	acceptable)
DAVIE	FL 33330
City	Zip
the place designated in this certificate, I hereby accept	vice of process for the above stated limited liability company at the appointment as registered agent and agree to act in this of all statutes relating to the proper and complete performance

(CONTINUED)

Page 1 of 2

<u> Fitle:</u>	Name and Address:
AMBR" = Authorized Member	
MGR" = Manager	
MGR	LUIS FORTUN
	4318 SW 130TH AVE
	DAVIE, FL 33330
	<u></u>
	
	
<u> </u>	
V: Effective date, if other than the dat tive date is listed, the date must be s	e of filing: <u>05/28/2014</u> . (OPTIONAL) pecific and cannot be more than five business days prior to or 9
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ARTICLE IV-