

L15000194972

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

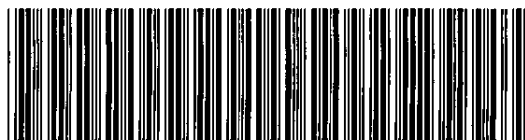
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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10/12/15--01011--018 **130.00

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AND
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15 NOV 23 AM 11:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

2015 OCT 12 PM 3:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11/23/15



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 13, 2015

CHARLES MCCURRY
910 N DUVAL ST
TALLAHASSEE, FL 32303

SUBJECT: GOOD LIFE USA, LLC
Ref. Number: W15000067658

We have received your document for GOOD LIFE USA, 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):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes.

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) 245-6052.

Terri J Schroeder
Regulatory Specialist II

Letter Number: 715A00021609

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: GOOD LIFE USA, 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:

MARK SEYFORTH

Name of Person

Firm/Company

1543 NW 165TH ST, SUITE 1543

Address

MIAMI GARDENS, FL 33169

City/State and Zip Code

KAMILAR@BELLSOUTH.NET

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

For further information concerning this matter, please call:

MARK SEYFORTH

937

830-0051

at ()

Name of Person

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)

Mailing Address

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Law Offices

MARK A. KAMILAR

2921 S.W. 27th Avenue

Coconut Grove, Florida 33133

Telephone: (305) 567-1112

Fax: (305) 567-2334

November 18, 2015

Chuck:

Enclosed are the corrected Articles of Organization for Good Life USA, LLC.

When the Division of Corporations returned the original package there should have been a document number commencing with the letter "W". This will have to be presented with this new filing.

Should you have any questions please call the office.

Regards,



Cristina Naveda,

Legal Assistant to Mark Kamilar

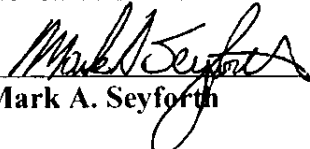
AFFIDAVIT OF MARK A. SEYFORTH

Before me the undersigned authority personally appeared Mark A. Seyforth, hereafter being sworn deposes and states as follows:

1. My name is Mark A. Seyforth.
2. I reside at 1501 Bellavista Avenue, Coral Gables, Florida 33156.
3. I have personal knowledge of the facts and circumstances contained herein.
4. I have been the Managing Member/Manager of Good Life USA, LLC since May 28, 2015.
5. Good Life USA, LLC has filed a corporate amendment changing its name to Good Life Global Holdings, LLC.
6. Good Life USA, LLC has no intention of revoking its amendment.
7. Good Life USA, LLC releases its name for use to Good Life Global Holdings, LLC.

Further affiant sayeth not.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 18th day of November, 2015.



Mark A. Seyforth

STATE OF FLORIDA)
 : ss.
COUNTY OF DADE)

15 NOV 23 AM 11:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AFFIDAVIT
AND
FILED

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid to take acknowledgements, personally appeared **MARK A. SEYFORTH**, to me known to the person described in and who executed the foregoing Affidavit and she acknowledged before me that she executed the same.

WITNESS my hand and official seal in the County and State last aforesaid this 18th day of November, 2015.

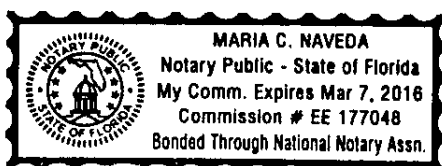


NOTARY PUBLIC

My Commission Expires:

(Personally know to me: ☒ OR

Produced ID (type): _____)



ARTICLES OF ORGANIZATION FOR GOOD LIFE USA, LLC

WE, the undersigned, in order to form a Limited Liability Company under and pursuant to the provisions of the laws of the State of Florida for the purposes set forth below, hereby subscribe to these Articles of Organization.

ARTICLE I - NAME

The name of the Company shall be GOOD LIFE USA, LLC

ARTICLE II - PRINCIPAL OFFICE

The principal office of this corporation shall be located at

1543 NW 165TH STREET
SUITE 1543
MIAMI GARDENS, FLORIDA 33169

ARTICLE III - REGISTERED AGENT

The name and the Florida street address of the registered agent are:

MARK A. KAMILAR, ESQ.
2921 SW 27TH AVENUE
COCONUT GROVE, FLORIDA 33133

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 605, F.S.


MARK A. KAMILAR, ESQUIRE

11-18-15
DATE

ARTICLE IV - MANAGERS AND/OR MANAGING MEMBERS

The names and addresses of each Manager or Managing Member is as follows:

Good Life Global Holdings, LLC - Managing Member

ARTICLE V - OWNERSHIP

a. Good Life Global Holdings, LLC shall own 100% of the ownership interest of the company.

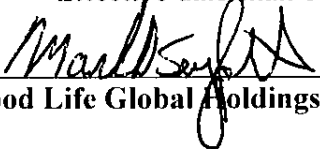
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TALLAHASSEE, FLORIDA

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ARTICLE VI - EFFECTIVE DATE

Effective date shall be the same as date of filing.



Good Life Global Holdings, LLC

11/18/15
DATE

This document is executed in accordance with section 605.0203(1)(b) Florida Statutes, 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.)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 NOV 23 AM 11:52

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