# 120000012249

(Re	equestor's Name)	···	
(Ac	ldress)		
(Ac	ldress)		
(Ci	ty/State/Zip/Phone	e #)	
PICK-UP	WAIT	MAIL	
(Bu	usiness Entity Nar	me)	
(Document Number)			
Certified Copies	_ Certificates	s of Status	
Special Instructions to Filing Officer:			





700339411657

10,704,113---01020--014 ++125.00

1319 OCT -- P. P. P. 2: 24

# COVER LETTER

TO: New I Divisi	Filing Section on of Corporations		
ento nizir.	New Focus Unlimited, LLC		
SUBJECT: _	Name of Limited Liability Company		
The enclosed A	Articles of Organization and fee(s) a	re submitted for filing.	
Please return a	Il correspondence concerning this n	natter to the following.	
		Frie R. Culbreath	
		Name of Person	
<del></del>		Firm Company	
	14()	6 South Lake Orlando Pkwy	
		Address	
		Orlando, FL 32808	
_		City State and Zip Code cke 1024/g out ook.com	
	E-mail address (to be use	d for future annual report notification)	
For further infor	mation concerning this matter, plea	se call:	
	Hric R. Culbreath	202 760-3437	
•		Area Code Daytime Telephone Number	
Enclosed is a c	theck for the following amount:		
S125.00 Filing	Free S130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & \$\ \text{Certified Copy} \text{Certified Copy is enclosed} \text{Certified Copy} \text{Certified Copy} \text{(additional copy is enclosed)} \text{Certified Copy} \text{(additional copy is enclosed)}	
	Mailing Address  New Filing Section  Division of Corporations	Street Address  New Filing Section  Division of Corporations	
	P.O. Box 6327 Tallabassee, FL 32314	Clifton Building 2561 Executive Center Circle	
		Tallahassee, FL 32501	

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	New Focus Un		
(Must cor	tain the words "Limited Lia	bility Company.	"L.L.C.," or "LLC")
RTICLE II - Address: se mailing address and street	address of the principal offic	te of the Limited	Liability Company is:
<u>Princi</u>	pal Office Address:		Mailing Address:
	de de Oleman	4-106	South Lake Orlando Pkwy
4406 South Lake O	nando rkwy		Double Bake Critical Control
Orlando, FL 32808  RTICLE III - Registered Ay he Limited Liability Compar other business entity with an	gent, Registered Office, & y cunnot serve as its own Re active Florida (egistration)	Registered Agen rgistered Agent A	ndo, F1, 32808
Orlando, FL 32808  RTICLE III - Registered As	gent, Registered Office, & y cannot serve as its own Re active Florida (egistration) (address of the (egistered ag Enc R	Registered Agen rgistered Agent A	ndo, Fl. 32808 nCs Signature:
Orlando, FL 32808  RTICLE III - Registered Ay he Limited Liability Compar other business entity with an	gent, Registered Office, & y cannot serve as its own Re active Florida (egistration) (address of the (egistered ag Enc R	Registered Agen rgistered Agent N gent are: . Culbreath	ndo, F1, 32808  nCs Signature: You must designate an individual or
Orlando, FL 32808  RTICLE III - Registered Ay he Limited Liability Compar other business entity with an	gent, Registered Office, & y cannot serve as its own Re active Florida (egistration) (address of the (egistered ag Enc R	Registered Agen rgistered Agent N gent are: . Culbreath dame .ake Orlando Pkw	ndo, F1, 32808  nCs Signature: For must designate an individual or
Orlando, FL 32808  RTICLE III - Registered Ay he Limited Liability Compar other business entity with an	gent, Registered Office, & y cannot serve as its own Re active Florida registration i taddress of the registered ag Enc R 8	Registered Agen rgistered Agent N gent are: . Culbreath dame .ake Orlando Pkw	ndo, F1, 32808  nCs Signature: For must designate an individual or

(CONTINUED)

1919 NOT -1- PT 2: 24

# ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:	Name and Address:
"AMBR" - Authorized Member	
"MGR" = Manager	17.7 th Walkenards
<u>AMBR</u>	Eric R. Culbreath 4406 South Lake Orlando Pkwy
	4496 South Lake Orlando PKWV
	Orlando, FL 32808
(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 b	e specific and cannot be more than five business days prior to or 90 days aft
the date of filing.)	
	not meet the applicable statutory tiling requirements, this date will not be listed
the document's effective date on the Departn	nent of State's records.
ARTICLE VI: Other provisions, (fany	
	and the same of th
	$A \leftarrow A$ .
REQUIRED SIGNATURE	
	1/00/1/10/1
Signature of	a member or an authorized representative of a member.
This document is ex	secuted in accordance with section 605.0203 (1) (b), Florida Statutes, false information submitted in a document to the Department of State
I am aware that any	egree felony as provided for in s.817.155, F.S.
constitutes a time of	egree leadily as provided for it six (7.755, 1.5).
	Eric R. Culbreath - Organizer/Member
	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)