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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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	L. SELLERS	<u> </u>
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Office Use Only

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SECRETARY OF STATE
ALLARADESEC. FLORIDA

12-54205



October 23, 2012

LISA DONALDSON 100 E MAIN ST SAMSON, AL 36477

SUBJECT: N.U.W. GRAPHICS, LLC

Ref. Number: W12000054205

We have received your document for N.U.W. GRAPHICS, LLC and your check(s) totaling \$160.00. However, the document has not been filed and is being retained in this office for the following:

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

Please return 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.

Tammy Hampton Regulatory Specialist II

Letter Number: 812A00026041

#### **COVER LETTER**

	tration Section ion of Corporations			
· SUBJECT: _	N. U. W. Graphic	me of Limited Liability Compan	у	
	Application by Foreign Limited Lia check are submitted to register the a			
Please return a	!! correspondence concerning this m	atter to the following:		
	LISA	DONALDSON Name of Person		
		. Graphics, Ll		
	100 E	Main St Address		
	Samso	Oity/State and Zip Code	7	
	Nuwgrap E-mail address: (	phics @ yahoo! (on to be used for future annual repo	ort notification)	
For further info	ormation concerning this matter, plea	ase call:		
	LISA DONALDSON Name of Person	at (33 4) Area Code & Daytime Tel	898 1178 ephone Number	
Divisi Regist P.O. B	on of Corporations tration Section Box 6327 bassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		
	a check for the following amou 00 Filing Fee \$130.00 Filing Fe Certificate of Sta	ee & \$\int\\$155.00 \text{ Filing Fee &}	\$160.00 Filing Fee, Certific of Status & Certified Copy	ate

### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

	PLIANCE WITH . LIABILITY COMP						BMITTED TO	O REGISTER A	FOREIGN
1	N.U. W Name of Foreign I	Limited Liabi	ility Compan	y; must include	"Limited Li	ability Compa	ny," "L.L.C	," or "LLC.")	
consent	unavailable, enter of the managers or y," "L.L.C," "LLC	r managing n	me adopted :	for the purpose opting the alterna	of transacting te name. The	g business in F e alternate nan	florida and at ne must inclu	ttach a copy of ide "Limited Li	the written ability
2.	AIABAMA			3	20-1	836600	6		
(Juriso compa	AIAIBAMA liction under the I my is organized)	aw of which	foreign limit	ed liability		(FEI number	, if applicab	le)	_
4.	JANUARY	1 20	7	5.	N/	A			
	January (Date of	Organization	)	<del></del>	(Duration: exist or "pe	Year limited li erpetual")	iability comp	any will cease	to
6.	NOVEM	BER	15th 2	012					
	Novem	(Date first (See section:	transacted by s 608.501 &	usiness in Florid 608.502 F.S. to	a, if prior to determine po	registration.) enalty liability	)		_
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	100	<i>-</i> 200	n.4 ( c =	r (Nen		44 54			
	100	E ///	(Str	reet Address of I	Principal Off	ice)	9/)		
8. If lir	nited liability c	company is	a managei	r-managed co	mpany, ch	eck here			
9. The	name and usua	l business :	addresses (	of the managi	na membe	rs or manao	ers are as f	follows:	
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	ction under the lav of the certificate (					e. It the certino	zate is in a to	reign language,	a
11. Nat	ure of business	or purpos	es to be co	nducted or pr	omoted in	Florida:	2 na Lo	cation in	<u>n</u> Florida
FOR	RETAIL	AND	TEAM	SALES	AND	ORDERS	FOR	CUSTOM	PRINTING
		2	1	Duck				≥⊴ ⊸	
		Signature o	of a member	er or an autho	rized repre	sentative of	a member	. [] <b>2</b>	
	,			F.S., the execution	=				
	penalties of	f perjury that the	he facts stated	herein are true I	am aware th	at any false in	formation sul	bmitted in a	42 Tarang
	document	to the Depart		e constitutes a th			ueu for in S.?		
	•		Typed	or printed na	me of sign	ee .			5.
			Typeu	ог ріниси на	me or aigh			SIAI <b>5:</b>	

### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE · UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:
N. U. W. Graphics UC
If unavailable, the alternate to be used in the state of Florida is:
2. The name and the Florida street address of the registered agent and office are:
LISA Donaldson (Name)
(Name)
Florida Street Address (P.O. Box NOT ACCEPTABLE)
DESTIN FL 32541 City/State/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, Florida Statutes.

Lai Vonda
(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)



## State of Alabama Department of Revenue

#### **Certificate of Good Standing**

N.U.W. Graphics, LLC is in compliance with the Alabama business privilege tax payment and return requirements in Chapter 14A, Title 40, Code of Alabama 1975 as of the date of issuance. This certificate is valid for sixty days from the date of issuance.

IN WITNESS WHEREOF, I hereunto set my hand this date of November 02, 2012.

Director, Individual and Corporate Tax Division

ATTEST:

Secretary

**Business Privilege Tax** 

Phone: 334-353-7923 Fax: 334-242-8915

Request Date: October 29, 2012 Request Code: 121029227083