



State of Florida
Office of State Treasurer
Tallahassee, Florida

FOR OFFICIAL USE	
DATE	NUMBER
07/26/2000	10305

DEBIT MEMORANDUM

To: DEPARTMENT OF STATE

P 00 00 00 65002

2

General Revenue Total	0.00
Trust Total	3,357.50
Other Total	0.00
Total	\$3,357.50

200003389092--0

Distribution

Cross Ref	Samas Code	Reason	Amount
008	45-20-2-130001-45300100-00-000100-00	INSUFFICIENT FUNDS	10.00
008	45-20-2-130001-45300100-00-000100-00	OTHER	55.00
008	45-20-2-130001-45300100-00-000100-00	INSUFFICIENT FUNDS	61.25
008	45-20-2-130001-45300100-00-000100-00	INSUFFICIENT FUNDS	78.75
008	45-20-2-130001-45300100-00-000100-00	INSUFFICIENT FUNDS	88.75
008	45-20-2-130001-45300100-00-000100-00	INSUFFICIENT FUNDS	150.00
008	45-20-2-130001-45300100-00-000100-00	INSUFFICIENT FUNDS	150.00
008	45-20-2-130001-45300100-00-000100-00	OTHER	150.00
008	45-20-2-130001-45300100-00-000100-00	INSUFFICIENT FUNDS	463.75
008	45-20-2-130001-45300100-00-000100-00	INSUFFICIENT FUNDS	550.00
008	45-20-2-130001-45300100-00-000100-00	INSUFFICIENT FUNDS	550.00
008	45-20-2-130001-45300100-00-000100-00	INSUFFICIENT FUNDS	1,050.00

Grand Total: **\$3,357.50**

BUREAU OF
PLANNING, BUDGET AND
FINANCE

00 JUL 28 PM 2:13

RECEIVED

The above named fund(s) has been reduced by the amount of this check(s) under the authority of Section 215.34, F.S.

Dale Nelson

Process Date: 07/18/2000

State Treasurer

DATE 7/6/00 3 403
63-7818/2870

63-781912670

Securely
Delete
On Mac

17038
ST. LUCIE COMMUNITY CREDIT UNION 3000
LAKE DRIVE
LAKE CHARLES, LA 70601
713-667-0000

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FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

August 9, 2000

Chavoita E. Lesane
1461 Griffin Terrace
Port St. Lucie, FL 34952

Subject: NEW LIFE / HOPE CORP., P00000065002 (New Articles)
NEW LIFE/HOPE CORP., N97000007186 (Reinstatement & Voluntary
Dissolution)

Debit Memo #10305-I

This is to inform you that your check #403 dated July 6, 2000 in the amount of \$463.75 has been returned to us by your bank because of Nonsufficient Funds.

We request that you remit a cashier's check or money order in amount of \$486.94 made payable to the Department of State. This amount will cover the unpaid check and the service fee required by law under section 215.34, Florida Statutes.

When sending the cashiers check or money order, please indicate the debit memo number and that it is a replacement for the returned check mentioned above.

Please note: The documents filed in this office with the returned check will be canceled unless a replacement check is received within 30 days from the date of this letter. Send the replacement check to:

Division of Corporations
Attn: Melinda Lilliston
P.O. Box 6327
Tallahassee, Florida 32314

If you have any questions concerning the returned check, please call
(850) 487-6900.

cc: New Life/Hope Corp. 143 SW Bedford Rd., Port St. Lucie, FL 34953





FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

September 11, 2000

Chavoita E. Lesane
1461 Griffin Terrace
Port St. Lucie, FL 34952

SUBJECT: NEW LIFE / HOPE CORP.
Ref. Number: P00000065002

Debit Memo #: 10305-1

Due to your failure to respond to our previous letter advising you of the returned check #403, the Articles of Incorporation for NEW LIFE / HOPE CORP. have been cancelled and are considered not filed as of September 11, 2000.

The name of your corporation is now available for use.

If you have any questions concerning the returned check, please call (850) 487-6900.

Sincerely
Melinda Lilliston
Administrative Assistant II
Division of Corporations

Letter number: 700A00047966

cc: New Life/Hope Corp.
143 SW Bedford Rd.
Pt. St. Lucie, Fl. 34953