

L05000104603

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

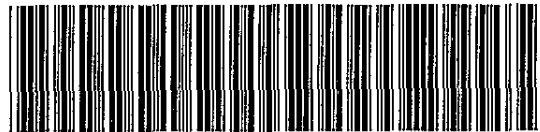
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Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

[Signature] 10/25/05

Office Use Only



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 OCT 24 PM 12:47

FILED
AND
RECEIVED

October 21, 2005

William A. Price

1441 NE 24th Court
Fort Lauderdale, FL 33305
Phone: (954) 630-2024
Day Time: (954) 829-3952
Email: cifertech@comcast.net

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

Enclosed find the Articles of Incorporation for Outdoor LIVING Lawn Care, LLC along with filing fees of one hundred and sixty dollars and no cents made payable to Florida Department of State.

In the header find name, address, daytime phone and email. Should you require any additional information please call or email as you would deem necessary.

Sincerely,



William A. Price

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

Outdoor Living Lawn Care LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

1441 NE 24th Court

Wilton Manors FL, 33305

Mailing Address:

1441 NE 24th Court

Wilton Manors FL, 33305

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

William A. Price

Name

1441 NE 24th Court

Florida street address (P.O. Box **NOT** acceptable)

Wilton Manors, FLORIDA 33305

City, State, and Zip

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TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

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..



Registered Agent's Signature

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

William A. Price

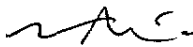
1441 NE 24th Court

Wilton Manors FL, 33305

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

WILLIAM A. PRICE

Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 OCT 24 PM 12:47

APPROVED
AND
FILED

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)