

L100000013772

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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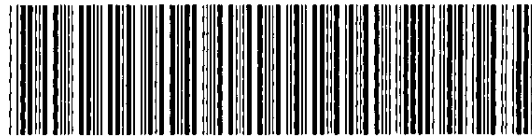
FEB - 5. 2010

EXAMINER

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02/05/10--01002--011 \*\*125.00

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10 FEB -4 PM 3:57

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Live On The Outside**

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:

**Matthew McGee & Chris Wagner**

Name of Person

**Live On The Outside**

Firm/Company

**3900 Yorktowne Blvd #5006**

Address

**Port Orange, FL 32129**

City/State and Zip Code

**LiveOnTheOutside@gmail.com**

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

For further information concerning this matter, please call:

**Matthew McGee**

Name of Person

at ( **217** )

**649-8826**

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:



\$125.00 Filing Fee

MM



\$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**

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

**Street/Courier Address**

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 12, 2010

MATTHEW MCGEE  
3900 YORKTOWNE BLVD., #5006  
PORT ORANGE, FL 32129

SUBJECT: LIVE ON THE OUTSIDE LLC  
Ref. Number: W10000001275

We have received your document for LIVE ON THE OUTSIDE LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$125.00.

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on January 11, 2010. Please amend your document accordingly.

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) 245-6967.

Leslie Sellers  
Regulatory Specialist II

Letter Number: 510A00000898

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

Live On The Outside LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

### ARTICLE II - Address:

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

#### Principal Office Address:

3900 Yorktowne Blvd #5006  
Port Orange, FL 32129

#### Mailing Address:

3900 Yorktowne Blvd #5006  
Port Orange, FL 32129

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Matthew McGee

Name

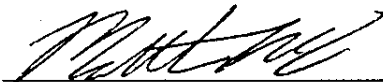
3900 Yorktowne Blvd #5006

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

Port Orange, FL 32129 FL

City, State, and 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, F.S..*



Registered Agent's Signature (REQUIRED)

(CONTINUED)

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TALLAHASSEE, FLORIDA

**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:**

MGRM

Matthew McGee

3900 Yorktowne Blvd #5006

Port Orange, FL 32129

MGRM

Chris Wagner

3900 Yorktowne Blvd #5002

Port Orange, FL 32129

(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 be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**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.)

Matthew McGee

Typed or printed name of signer

**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)

**FILED**  
10 FEB -4 PM 3:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA