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SECRETARY OF STATE
ALLAHASSEE FLOSIE

D. BRUCE

OCT 13 2010

EXAMINER

## **COVER LETTER**

TO:

**Registration Section** 

Division of C	orporations					
SUBJECT: Living	Water Media LLC					
		d Liability Com	pany			
The enclosed Articles	of Organization and fee(s) are s	submitted for fili	ng.			
Please return all corres	pondence concerning this matte	er to the followin	ng:			
Ken Berry						
		Name of Person				
Living Wate	r Media LLC					
<del></del>		Firm/Company		,		<del></del>
1848 Maeve	e Circle					
		Address			هيوارد د د	_
West Melbo	urne, FL 32904					10 00
	City	/State and Zip Co	de		S	ĭ
ken@livingv	vater-media.com				SAX.	2
For further information	E-mail address: (to be used for concerning this matter, please		port notification)		OF ST	] 1
Ken Berry		at ( 321	<sub>)</sub> 544-635	1	RIDA	<u>5</u>
Name	of Person		de & Daytime Tel	ephone Number		
Enclosed is a check f	or the following amount:			A		
□\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	S155.00 Fili Certified C (additional co		\$160.00 Fili Certificate of Certified Co (additional cop	of Status & opy	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registra Division Clifton 2661 Ex	Courier Address tion Section n of Corporation Building secutive Center ssee, FL 32301	ıs		

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is	:
Living Water Media LLC (Must end with the words "Limited Liab	ility Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the p	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1848 Maeve Circle	1848 Maeve Circle
West Melbourne, FL 32904	West Melbourne, FL 32904
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.)  The name and the Florida street address of the	registered agent are:
Ken Berry	SEE SEE
Name	·
1848 Maeve Circle	
Florida street ad	dress (P.O. Box NOT acceptable)

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..

City, State, and Zip

FL 32904

Registered Agent's Signature (REQUIRED)

West Melbourne

(CONTINUED)
Page 1 of 2



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

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

	Manager = Managing Member	Name and Address:
MGRM		Ken Berry
		1848 Maeve Circle
		West Melbourne, FL 32904
MGRM		Wendy Berry
		1848 Maeve Circle
		West Melbourne, FL 32904
<u></u>	······································	
	<del></del>	
(I lea attach	ment if necessary)	
FICLE V: Effe n effective date · 90 days after	e is listed, the date must the date of filing.)	te date of filing: 1 January 2011 (OPTIONAL)  be specific and cannot be more than five business days pri
FICLE V: Effe n effective date · 90 days after	ective date, if other than the is listed, the date must be the date of filing.)  ED SIGNATURE:	be specific and cannot be more than five business days pri
FICLE V: Effe n effective date · 90 days after	ective date, if other than the is listed, the date must in the date of filing.)  ED SIGNATURE:  Signature of a member of a mem	be specific and cannot be more than five business days pride of a member.  A S S S S S S S S S S S S S S S S S S

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)