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SECRETARY OF STATE
TALLAHASSEE, FLORING

T. HAMPTON

APR 1 0 2009

EXAMINER

COVER LETTER

_	tration Section ion of Corporations							
SUBJECT:		ted Liability Company)						
Florida," Cert		bility Company for Authorization to Transact Business in bmitted to register the above referenced foreign limited						
Please return	all correspondence concerning this ma	atter to the following:						
	Michael G. S.	_						
(Name of Person)								
	LVO Riders	Girage . com LLC						
	(Fin	m/Company)						
7/16 Meden Rd.								
	1	(Address)						
Tallahassee, FL								
(City/State and Zip Code)								
For further information concerning this matter, please call:								
,	Michael 6. Scott	at (Area Code & Daytime Telephone Number)						
	(Name of Person)	(Area Code & Daytime Telephone Number)						
MAII	LING ADDRESS:	STREET ADDRESS:						
	ion of Corporations	Division of Corporations						
	Box 6327	Clifton Building 2661 Executive Center Circle						
i aniai	hassee, FL 32314	Tallahassee, FL 32301						
	check for the following amount: 5.00 Filing Fee \$\frac{1}{3}\$130.00 Filing Fee & Certificate of	\$155.00 Filing Fee & \$160.00 Filing Fee, Certificate Status Certified Copy of Status & Certified Copy						

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1. CVO Riders Garese. com LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.") (Jurisdiction under the law of which foreign limited liability company is organized) perpetual 3-/z- Zouq (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability) 8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows: See attacked 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.) Website 11. Nature of business or purposes to be conducted or promoted in Florida: Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the elecution of this document constitutes an affirmation under the seculives of perjury that the facts stated herein are true.)

Typed or printed name of signee

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 t	he Limited Liabili	ty Compa Rider	any is: Survey	.com L	1		
			e used in the state of				-
2. The name and	the Florida street	address o	of the registered ag	ent and office a	re:		-
	Mich	hel .	6.5 cott				
-	70	416	6. Seott (Name) Maclean	Rd.			
-	Florida	Street Addı	ress (P.O. Box NOT A	CCEPTABLE)			
-	Telle	Lesse	FL City/State/Zip	3231	2		
liability company agent and agree to relating to the pro	at the place design o act in this capaci oper and complete	nated in th ity. I furth performan	o accept service of pais certificate, I here there agree to comply the of my duties, and as provided for in (by accept the ap with the provisi d I am familiar v	ppointment ons of all with and a	t as registe statutes eccept the	ered
M/n	(Signature)				SECRET TALLAHA	09 APR 10	İ
		\$ 100.00 \$ 25.00	~ -	-	TARY OF SI HASSEE.FLO		, •
		\$ 30.00 \$ 5.00	Certified Copy (optional)	FLO.	₽ ?: O)

\$ 15400

MGRM

CVO Riders Garage.com LLC Managers List

Howie Singer 161-11 59th Avenue Flushing, NY 11365 917-217-8333

Tim Kennedy 7643 NE Champagne Point Place Kirkland, WA 98034 206 650 3783

Brian H. Webb 14350 Gaelyn Court Poway, California 92064 (858) 449-5809

Brian Bracey 5133 Sycamore Lane Kitty Hawk NC 27949 252-202-2853

Mike Scott 7876 Maclean Rd. Tallahassee, FL 32312 850-894-0537

JC Carroll 450 Wynonah Drive Auburn, PA 17922 570-617-8835 SECRETARY OF STATE

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "THE CVO RIDERS GARAGE.COM LLC" IS

DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN

GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF

THIS OFFICE SHOW, AS OF THE SEVENTH DAY OF APRIL, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED
LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF
DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT
HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS
OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "THE CVO RIDERS GARAGE.COM LLC" WAS FORMED ON THE TWELFTH DAY OF MARCH, A.D. 2009.

1664777 8300

090342386

. . .

AUTHENTY CATION: 7233237

DATE: 04-07-09

You may verify this certificate online at corp. delaware.gov/authver.shtml