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SECULIANT OF SIGN

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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: General Waters Inc.
Name of corporation - must include suffix
Dear Sir or Madam:
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.
Please return all correspondence concerning this matter to the following:
Joseph Cornwell
Name of Person
General Waters Inc.
Firm/Company
7101 Presidents Drive, Suite 350
Address
Orlando, Florida 32809
City/State and Zip code
jomicor@celadoninc.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Joseph Cornwell at (407)851-5995
Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building MAILING ADDRESS: New Filing Section Division of Corporations Cloporations P.O. Box 6327
2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301
Enclosed is a check for the following amount:
\$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status \$78.75 Filing Fee & Certificate of Status &

Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

. General Wa	ters Inc.		ALL SECT	12	
(Enter name of c	orporation; must include "INCORPORATE orp," "Inc," "Co," or "Corp.")	ED," "COMPANY," "CORPORATION,"		<u>₩</u> 0¥ -8	-
General W	aters Distributors			72	
(If name unavail	able in Florida, enter alternate corporate na	me adopted for the purpose of transacting but	siness in	Floric	da)
Delaware		_{3.} 45-5129373		14 T	
	under the law of which it is incorporated)	(FEI number, if applicable	le)		
02/16/2012	2	5. Perpetual			
(Date	of incorporation)	(Duration: Year corp. will cease to exis	t or "per	petual	")
<u>November</u>	12, 2012				
		s in Florida, if prior to registration) 7.1502, F.S., to determine penalty liability)			
7101 Presid	dents Drive, Suite 350 Orland	do Florida 32809			
	(Principal office a				
7101 Pre	eidente Drive Suite 31	EO Orlanda Flarida 00	000		
, , , , , , ,	Bluellia Dilve, Julie 3	ou, Unando Florida 328	809		
7 101 1 10	(Current mailing a	50, Orlando Florida 32	809		
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Beverage [(Current mailing a Distribution) of corporation authorized in home state or	ddress) country to be carried out in state of Florida)			
Beverage [(Purpose(s Name and stree	(Current mailing a Distribution) of corporation authorized in home state or taddress of Florida registered agent: (I	country to be carried out in state of Florida) P.O. Box NOT acceptable)			
Beverage [(Purpose(s . Name and stree . Name:	(Current mailing a Distribution) of corporation authorized in home state or t address of Florida registered agent: (Fuseph Cornwell	country to be carried out in state of Florida) P.O. Box NOT acceptable) 0			
. Beverage [(Purpose(s	(Current mailing a Distribution) of corporation authorized in home state or t address of Florida registered agent: (Floseph Cornwell 7101 Presidents Drive Suite 35	country to be carried out in state of Florida) P.O. Box NOT acceptable) O, Florida 32809			
Beverage I (Purpose(s Name and stree Name: Office Address:	(Current mailing a Distribution) of corporation authorized in home state or address of Florida registered agent: (For Joseph Cornwell 7101 Presidents Drive Suite 35 Orlando (City) gent's acceptance:	country to be carried out in state of Florida) P.O. Box NOT acceptable) O, Florida 32809, Cip code)			
Beverage [(Purpose(s)) (Purpose(s)) Name and stree Name: Office Address:	(Current mailing a Distribution) of corporation authorized in home state or address of Florida registered agent: (For Joseph Cornwell 7101 Presidents Drive Suite 35 Orlando (City) Gent's acceptance: The definition of a complete appointment of the provisions of all statutes.	country to be carried out in state of Florida) P.O. Box NOT acceptable) O , Florida 32809 (Zip code) rvice of process for the above stated corputation as registered agent and agree to be relative to the proper and complete per	poration act in th	is ca	pac
Beverage [(Purpose(s)) (Purpose(s)) Name and stree Name: Office Address: Office Address:	(Current mailing a Distribution) of corporation authorized in home state or address of Florida registered agent: (For Joseph Cornwell 7101 Presidents Drive Suite 35 Orlando (City) The secretance: Seed as registered agent and to accept seed application, I hereby accept the appoint	country to be carried out in state of Florida) P.O. Box NOT acceptable) O , Florida 32809 (Zip code) rvice of process for the above stated corputation as registered agent and agree to be relative to the proper and complete per	poration act in th	is ca	paci
Beverage [(Purpose(s)) (Purpose(s)) Name and stree Name: Office Address: Office Address:	(Current mailing a Distribution) of corporation authorized in home state or address of Florida registered agent: (For Joseph Cornwell 7101 Presidents Drive Suite 35 Orlando (City) Gent's acceptance: The definition of a complete appointment of the provisions of all statutes.	country to be carried out in state of Florida) P.O. Box NOT acceptable) O , Florida 32809 (Zip code) rvice of process for the above stated corputation as registered agent and agree to be relative to the proper and complete per	poration act in th	is ca	pac

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to

12. Names and business addresses of officers and/or directors:
A. DIRECTORS Z
Chairman: William Freeman
Address: 2711 Centerville Road Suite 400
Wilmington, DE 19808
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
B. OFFICERS
President: Joseph Cornwell
2711 Centerville Boad Suite 400
Wilmington, DE 19808
Vice President:
Address:
Joseph Cornwell
Secretary: Joseph Cornwell
Address: 2711 Centerville Road, Suite 400 Wilmington, DE 19808
Treasurer:
Address:
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13. Signature of Director or Officer
The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a
third degree felony as provided for in s.817.155, F.S.

M. Joseph Cornwell, President

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "GENERAL WATERS INC." IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN

GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE

RECORDS OF THIS OFFICE SHOW, AS OF THE THIRTY-FIRST DAY OF

OCTOBER, A.D. 2012.

FILED

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SECRETARD OF THE PHONE IN THE

5110588 8300

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Jeffrey W. Bullock, Secretary of State

AUTHENTYCATION: 9954629

DATE: 10-31-12

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