Saline hexures Horiou, ic Policy Requester's Name	l
770 Pondella,#363 Address Ft. Myers, Fl. 33903 City/State/Zip Phone #	
Office Use Only	
CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): Wol-3552	
1.00799.00623-00671 800003574748	9——5 -007 125.00
2 Saline Resources Florida LLC	
(Corporation Name) (Document #)	
3(Corporation Name) (Document #)	·
4	L
(Corporation Name) (Document #)	
Walk in ☐ Pick up time ☐ Certified Copy ☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status	
PACIFIC CONTRACTOR OF THE CONT	
NEW FILINGS Profit Not for Profit Limited Liability Domestication Other AMENDMENTS Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger	FILED
OTHER FILINGS REGISTRATION/QUALIFICATION	F
Annual Report Fictitious Name Limited Partnership Reinstatement Trademark Other	
CR2E031(7/97) Examiner's Initials	



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

February 26, 2001

SALINE RESOURCES FLORIDA, LC 770 PONDELLA #263 FT. MYERS, FL 33903

SUBJECT: SALINE RESOURCES FLORIDA, LC

Ref. Number: W01000003552

We have received your document for SALINE RESOURCES FLORIDA, LC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 487-6967.

Michelle Hodges Document Specialist

Letter Number: 001A00009302

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Saline Resources Florida, LC

ARTICLE II - Address:

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

770 Pondella Rd., #263 Ft. Myers, FL 33903

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

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

Michael W.	Do Pew		
770 Pondella	Name .		
Florida street addres	s (P.O. Box NOT acceptable)	-	
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

Article IV - Management	(Check box if applicable.)
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The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)	SEC	<u> </u>	
Signature of a member or an authorized representative of a member.	AHA AHA	MAR	*****
(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.)	NRY OF SSEE, F	-9 PM	-ILEU
Michael W. De Pew Typed or printed name of signee	STATE	12:30	

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)