Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H04000159992 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Milh

To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name

: CORPDIRECT AGENTS, INC.

Account Number : 110450000714

: (850)222-1173

Phone

Fax:Number

: (850)224-1640

0500-28713

LIMITED LIABILITY COMPANY

BAY WELL AND IRRIGATION, LLC

Certificate of Status	O
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

Electronic Mine Manu.

Compensio Filing

Rublic Access Holp

ARTICLES OF ORGA FOR FLORIDA LIMITED LIABI)	n (
ARTICLE I - Name: The name of the Limited Liability Company is:		
BAY WELL AND IRRIGATION, LLC		
ARTICLE II - Address: The mailing address and street address of the principal	l office of the Limited Liability Company is	
Principal Office Address;	Mailing Address:	
3909 COUNTRY CLUB DRIVE	P.O. BOX 15158	
LYNN HAVEN FL 32444	PANAMA CITY, FLORIDA 32466	
ARTICLE III - Registered Agent, Registered Offic The name and the Florida street address of the register	e, & Registered Agent's Signature: ed agent are:	

Name
603 KRISTANNA DRIVE
Florids street address (P.O. Box <u>NOT</u> acceptable)

CHARLES G. TUCKER

PANAMA CITY FLORIDA 32405

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, Florida Statutes.

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

D03

H040001599923

Title:	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	
MORM	JAMES STANTON RUDDICK, JR.
<u></u>	P.O. BOX 1515B
	PANAMA CITY FL 32408
·	
(Use attachment if necessary)	
NOTE: An additional article mus	t be added if an effective date is requested.
REQUIRED SIGNATURE:	
(- total	talalikon:
Signature of a member or	es authorized representative of a member.
(In accordance with section of this document constitutes that the facts stated berein a	608.408(3), Ploride Statutes, the execution on affirmation under the penalties of parjury se true.)
JAMES STANTON RUDI	DICK, JR.

Filing Feta:
#100.00 Filing Fee for Articles of Organization
#25.00 Designation of Registered Agent
#25.00 Certified Copy (Optional)
#25.00 Certificate of Status (Optional)