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TRANSMITTAL LETTER

	ristration Section ision of Corporations				
SUBJECT:	Rosegger Ag	ed Liability Co	ervices,	_LC	
	•	•	- •		
The enclosed	d Articles of Organization and fee(s) are	submitted for f	iling.		
Please return	all correspondence concerning this matt	er to the follow	ving:		
	Tom Rosegger			·	
		(Name of Person)	ب ن	
				Lales #	
<u></u>		(Firm/Company)	10000000000000000000000000000000000000	-
	5309 Lake Luth	er Rd		ASSEE, FLORID	17
		(Address)		- GR	. 2
	Lakeland, FL	338	305	DAS	υ.
	(Cit	y/State and Zip (Code)		•
For further in	nformation concerning this matter, please	e call:			
Tom	Rosegge (Name of Person)	_at <u>35</u> Z	Z67 Code & Daytime T	- 3917	
	(ivaine of reison)	(Mica	Code & Daytime 1	elephone (varioer)	
Enclosed is	s a check for the following amount:	,			
□ \$125.00 F	Filing Fee \$130.00 Filing Fee & Certificate of Status	Certified (0 Filing Fee & Copy copy is enclosed)	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	STREET ADDRESS:		MAILING A	.DDRESS:	
Registration Section			Registration S		
	Division of Corporations 409 E. Gaines Street		Division of C P.O. Box 632		
	Tallahassee, Florida 32399		Tallahassee,	Florida 32314	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:				
Rosegger Aquatic	Services, LLC			
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:			
Rosegger Aquatic Services, LLC	SANE			
5309 Lake Luther RA	TE = T			
Lakeland, FL 33805	207			
ARTICLE III - Registered Agent, Registered	Office, & Registered Agent's Signature: 3			
The name and the Florida street address of the registered agent are:				
Thomas M. R Name	losegger Egy			
Name	•			
5309 Lake L	other Rol.			
Florida street addr	ess (P.O. Box NOT acceptable)			
Lakeland, FL City, State, ar	FL 33805			
City, State, ar	d Lip			

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..

Thorne M. Roseff Registered Agent's Signature

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Manager The name and address of each Manager					
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:				
MGR	Tom Rosegger 5309 Lake Luther Rd Lakeland, FL 33805				
/ . 4					
(Use attachment if necessary) NOTE: An additional article must be	e added if an effective date is requested.				
REQUIRED SIGNATURE:					
Signature of a member of	or an authorized representative of a member.				
(In accordance with section of this document constitute that the facts stated here	on 608.408(3), Florida Statutes, the execution tes an affirmation under the penalties of perjury ein are true.)				
Thomas	M. Rosegges d or printed name of signee				

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)