

L05000039790

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA
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CORPORATION NAME (S) AND DOCUMENT NUMBER (S)

Water Wise Landscape & Irrigation, L.L.C.

Filing Evidence

- ☐ Plain/Confirmation Copy
- ☒ Certified Copy

Retrieval Request

- ☐ Photocopy
- ☐ Certified Copy

Type of Document

- ☐ Certificate of Status
- ☐ Certificate of Good Standing
- ☐ Articles Only
- ☐ All Charter Documents to Include Articles & Amendments
- ☐ Fictitious Name Certificate
- ☐ Other

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	Non Profit
<input checked="" type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of RA Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Reports
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation
<input type="checkbox"/>	Reinstatement

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

APR 22, 2005
 TALLAHASSEE
 STATE
 FLORIDA
 FILED
 APR 22 AM 11:29

FILED
05 APR 22 AM 7:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION
OF
WATER WISE LANDSCAPE & IRRIGATION, L.L.C.**

ARTICLE I - NAME

**THE NAME OF THE LIMITED LIABILITY COMPANY IS WATER WISE
LANDSCAPE & IRRIGATION, L.L.C.**

ARTICLE II - ADDRESS

**THE mailing address and the street address of the principal office of the Limited
Liability Company is 2331 Captain Drive, Deltona, FL 32738.**

**ARTICLE III
REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED
AGENT'S SIGNATURE:**

**THE NAME AND THE FLORIDA STREET ADDRESS OF THE REGISTERED
AGENT ARE:**

**KATHLEEN S. MINER
180 NORTH PARK AVENUE, SUITE 200
WINTER PARK, FL 32789**

*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 property and complete
performance of my duties, and I am familiar with, and accepts the obligations of my
position as registered agent as provided for in Chapter 608, F.S..*


REGISTERED AGENT'S SIGNATURE

ARTICLE IV - MANAGER(S) OR MANAGING MEMBER(S):

**THE NAME AND ADDRESS OF EACH MANAGER OR MANAGING MEMBER IS
AS FOLLOWS:**

TITLE:

NAME AND ADDRESS:

MGR

**KATHLEEN S. MINER
2331 Captain Drive
Sanford, Florida 32771**

MGRM

James F. Miner
2331 Captain Drive
Deltona, FL 32738

MGRM

Todd Olds
1781 Philadelphia Court
DELTONA, FL 32738

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

IN WITNESS WHEREOF, THE UNDERSIGNED, AS A MMANAGER, HAS
EXECUTED THE

FOREGOING ARTICLES OF ORGANIZATION ON THE 22 DAY OF APRIL, 2005.


KATHLEEN S. MINER

(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.)

STATE OF FLORIDA
COUNTY OF ORANGE

22nd THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED BEFORE ME THIS
DAY OF APRIL, 2005, BY KATHLEEN S. MINER WHO IS ☒ PERSONALLY
KNOWN TO ME OR ☐ NOT PERSONALLY KNOWN TO ME AND HAS PRODUCED A
VALID DRIVER'S LICENSE AS IDENTIFICATION.

FLORIDA



Carol D. Hoban
My Commission CD188739
Expires June 13, 2007


NOTARY PUBLIC - STATE OF

MY COMMISSION EXPIRES: 6/13/07