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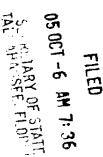
(Requestor's Name)				
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COVER LETTER

TO: Registration S Division of Co			
SUBJECT:	Waters Carpen (Name of Limite	try d Liability Company)	·
The enclosed Articles of	of Organization and fee(s) are s	submitted for filing.	
Please return all corresp	condence concerning this matte	er to the following:	
Rica	hard M Wate	PRS Name of Person)	
	hard M Date	Name of Person)	
<u></u> ωα	ters Carpent	ly	
		(Firm/Company)	
1910) W Galmette	St (Address)	
_	<u> </u>	(Addicas)	
lang		/State and Zip Code)	
For further information	concerning this matter, please	call:	950 TAL:
Richard u	laters	at (813) 748 -	SLORUARY OF STATE
(Name	e of Person)	(Area Code & Daytime Te	elephone Number)
Enclosed is a check for	or the following amount:		FL. FL.
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:	
Waters Calpentay, LLC (Must end with the words "Limited Liability Company, "Limited	I Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the prin	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1910 W Palmetto St Tanga, FL 33607	save
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	red Agent. You must designate an individual or another
The name and the Florida street address of the rep	gistered agent are:
<u>Janela Wa</u>	ters = = = = = =
	gistered agent are: texs eto St CROSSING STATES TO
	ess (P.O. Box <u>NOT</u> acceptable)
/anpa City, State, and	FL 33607 d Zip
Having been named as registered agent and to ac liability company at the place designated in thi registered agent and agree to act in this capacity. statutes relating to the proper and complete perf	except service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and ered agent as provided for in Chapter 608, F.S

(CONTINUED)
Page 1 of 2

The name and ac	Manager(s) or Managing Member(s): address of each Manager or Managing Member is as follows:		
<u>Title:</u> "MGR" = Manaş "MGRM" = Mar			
MGR	Richard M Waters 1910 W Balmetto St Tanga, FL 33607		
MGLM	Eric Sentino 1909 W Galmetto St Tanga, FL 33607		
(Use attachment	t if necessary)		
ARTICLE V: Effective	e date, if other than the date of filing: (OPTION sted, the date must be specific and cannot be more than five business date	•	
<u>REQUIRED</u> SI	IGNATURE:	∌v 0g	
	Richard M Waters Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), Florida Statutes, the execution	FURNISEE, FLO	FILED
	of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.) Richaed M Water 5 Typed or printed name of signee	F STATE.	ر د ۲

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)