L05000121725

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
(Document Number)
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Certified Copies Certificates of Status
Special Instructions to Fling Officer:

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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Walk-In

Will Pick Up

Waters Edge Deve	Jopens - The state of the state
	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art. of Amend. File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	1 Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
	Officer Search
	Fictitious Search
Signature	Fictitious Owner Search
·	Vehicle Search
	Driving Record
Requested by: 11 1272	UCC 1 or 3 File
Name Date	Time UCC 11 Search
	LICC 11 Retrieval

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is				pany is:
	Waters	Edge	Developers,	LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company's

<u>Mail</u>	ng A	<u>lddre</u>	69;

2600 South Kanner Highway	2600 South Kanner Highway
Unit "0" 12	Unit "0" 12
Stuart. FL 34994-4640	.Stuart, FL 34994-4540

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

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

	William P. Doney		
	Name		
	1665 Palm Beach Lakes Blvd., Suite 610		
	The Forum		
Florida street address (P.O. Box NOT acceptable)			
	West Palm Beach FL 33401		
	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 agregistered agent as provided for in Chapter 608, F.S..

Registered Agent's Signature

(CONTINUED)

Page 1 of 2

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" = Manager "MGRM" = Managing Member An O'Callaghan MGRM 2600 South Kanner Highway, unit "0" 12 Stuart, FL 34994-4640 (Use attachment if necessary) NOTE: An additional article must be added if an effective date is requested. REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member. (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.) William P. Doney

Filing Fees:

5125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
5 5.00 Certificate of Status (Optional)

Typed or printed name of signee