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(Re	questor's Name)	
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PICK-UP	MAIT	MAIL
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(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to I		ELC



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03/24/06--01046--025 **160.00

Office Use Only

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Waterbury Industries, LLC. (Name of Limited Liability Company)
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Sara & Jay Water bury (daughter father - co-wine
Waterbury Industries (Firm Company)
10796 916th Trail (Address)
Live Oak, FL 32060 (City State and Zip Code)
For further information concerning this matter, please call:
Sara Waterbury at (772) 3-12-4936 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\bigcup \\$130.00 Filing Fee & Certificate of Status \$\bigcup \text{Certified Copy} \\ \text{(additional copy is enclosed)} \\ \end{additional copy is enclosed} \end{additional copy is enclosed} \\ \end{additional copy is enclosed} \end{additional copy is enclosed}
Malling Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street/Courier Address Registration Section Division of Corporations Clifton Building Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Materbury Industry (Must end with the words "Limited Liability Company, "Limited	165 LLC 1 Company" or their abbreviation "LLC," or "I	".C.,")	
ARTICLE II - Address: The mailing address and street address of the print	ncipal office of the Limited Liabili	ly Comp	any is:
Principal Office Address:	Mailing Address:		
107869646 Trail Live Oak, FL32060	1080 NW 3040 W	ku 152	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	Office, & Registered Agent's Sig	nature: or another	⇒
The name and the Florida street address of the re	egistered agent are:	: .	2
Sara Wat Name	erbury	** = 1 **	~ n
110 80 NW 30 Florida street addi	ress (P.O. Box NOT acceptable)		~>
Ja Sper City, State, as	FL 32052 nd Zip		
Having been named as registered agent and to a liability company at the place designated in th registered agent and agree to act in this capacity statutes relating to the proper and complete per accept the obligations of my position as regis	his certificate, I hereby accept the ap v. I further agree to comply with the rformance of my duties, and I am far	pointmer provision niliar wit	nt as ns of all th and

(CONTINUED)
Page 1 of 2

Registered Agent's Signature (REQUIRED)

The name and address	of each Manager or Managing Member is as follows:
<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing	Member
MGR	Sara Waterbury 11080 NW 30th Waw Jasper FL 32052
MGR	Jay Waterbury 310 Olive Ave Port St. Lucie, FL 34952
(Use attachment if nece	essary)
RTICLE V: Effective date, i	f other than the date of filing: (OPTIONAL)
if an effective date is listed, the or 90 days after the date of	e date must be specific and cannot be more than five business days prior
REQUIRED SIGNAT	rure:
	hulted
Signa	ture of a member or an authorized representative of a member.
of thi	scordance with section 608.408(3), Florida Statutes, the execution is document constitutes an affirmation under the penalties of perjury the facts stated herein are true.) Social Control of the penalties of perjury the facts stated herein are true.)
	Typed or printed name of signee
Filing Fees:	£

ARTICLE IV- Manager(s) or Managing Member(s):

\$125.00 Filing Fee for Articles of Organization and Designation

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)