

LO7000045007

(Requestor's Name)

(Address)

(Address)

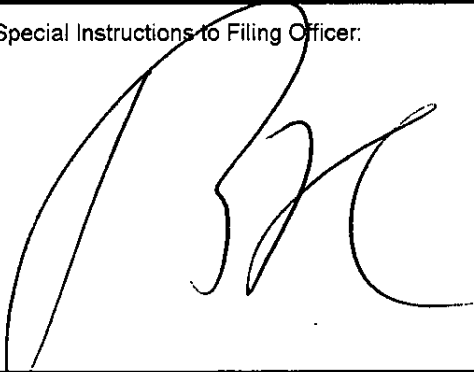
(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

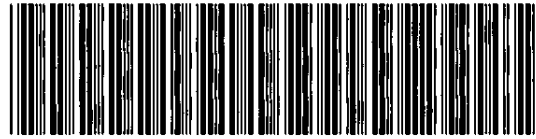
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/26/07--01013--001 **155.00

FILED
07 APR 26 PM 3:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
07 APR 26 AM 8:26
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

CAPITAL CONNECTION, INC.

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

Bluewater Pools LLC

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- 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 _____
- Cert. Copy _____
- Photo Copy _____
- Certificate of Good Standing _____
- Certificate of Status _____
- Certificate of Fictitious Name _____
- Corp Record Search _____
- Officer Search _____
- Fictitious Search _____
- Fictitious Owner Search _____
- Vehicle Search _____
- Driving Record _____
- UCC 1 or 3 File _____
- UCC 11 Search _____
- UCC 11 Retrieval _____
- Courier _____

Signature _____

Requested by: *WL*

Name

Date

Time

Walk-In

Will Pick Up

4/26 7:00



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 26, 2007

CAPITAL CONNECTION

TALLAHASSEE, FL

SUBJECT: BLUEWATER POOLS LLC
Ref. Number: W07000020282

RE-SUBMIT
PLEASE OBTAIN THE ORIGINAL
FILE DATE.

RECEIVED
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DIVISION OF CORPORATIONS
2007 APR 27 AM 9:16
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TO ACKNOWLEDGE
SUFFICIENCY OF FILING

FILED
07 APR 26 PM 3:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for BLUEWATER POOLS LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

BLUEWATER POOLS LLC cannot be its own Registered Agent. The individual - JAMES J. KELLY -- could be the R.A.,

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr
Document Specialist

Letter Number: 207A00028414

RE-SUBMIT
PLEASE OBTAIN THE ORIGINAL
FILE DATE.

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

FILED
07 APR 26 PM 3:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

BLUEWATER POOLS LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

**189 TUMBLIN KLING ROAD
FORT PIERCE FL 34982-6837**

Mailing Address:

**189 TUMBLIN KLING ROAD
FORT PIERCE FL 34982-6837**

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

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

**JAMES J. KELLY
189 TUMBLIN KLING ROAD
FORT PIERCE, FL 34982-6837**

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, Florida Statutes..


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:

"MGR" = Manager

"MGRM" = Managing Member

Name & Address:

MANAGING MEMBER:

**JAMES J. KELLY
189 TUMBLIN KLING ROAD
FORT PIERCE, FL 34982-6837**

MANAGING MEMBER:

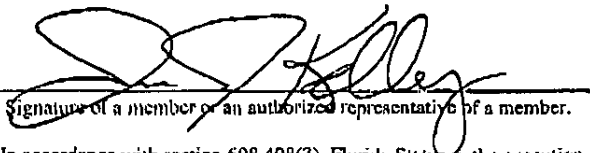
**MARGERY M. KELLY
189 TUMBLIN KLING ROAD
FORT PIERCE, FL 34982-6837**

MANAGING MEMBER:

**BRYANT J. KELLY
189 TUMBLIN KLING ROAD
FORT PIERCE, FL 34982-6387**

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.)

JAMES J. KELLY
Typed or printed name of signer

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)