

#L07000050261

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

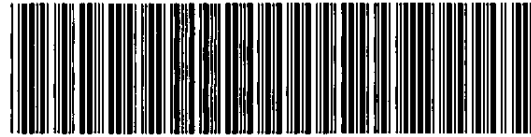
(Business Entity Name)

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TALLAHASSEE, FLORIDA

K. SALY
EXAMINER
JAN 26 2011

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Water Recovery, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michael A. Candeto, Esq.

Name of Person

Dale, Bald, Showalter, Mercier & Green, P.A.

Firm/Company

200 West Forsyth Street, Suite 1100

Address

Jacksonville, FL 32202

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael A. Candeto, Esq.

Name of Person

at (904)

355-1155

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 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 Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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TALLAHASSEE, FLORIDA
ords.)

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Steven T. Jenkins	P. O. Box 330358 Atlantic Beach, FL 32233	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
P	Steven T. Jenkins	1819 Albert Street Jacksonville, FL 32202	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
SEC	Posey H. Jenkins	1819 Albert Street Jacksonville, FL 32202	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated December 13th 2010 ³⁷⁰

Signature of a member or authorized representative of a member

Steven T. Jenkins, Manager

Typed or printed name of signee