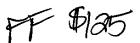
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(Re	equestor's Name))
(Ac	idress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)	
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only





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05/15/07--01015--011 **20.00

04/30/07--01005--002 **105.00

Effective Date 5/11/017

BLT

SECRETARY OF STATE
DIVISION OF CORPORATION

OF MAY 11 DM 12: OF THE PROPERTY O



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 1, 2007

ROBERT SCHAUS H2O CONDITIONING 5040 ITHACA LN. SARASOTA, FL 34243

SUBJECT: H2O CONDITIONING LLC

Ref. Number: W07000020984

We have received your document for H2O CONDITIONING LLC and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

The total amount due is \$125.00.

There is a balance due of \$20.00.

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) 245-6911.

Letter Number: 807A00030135

Brenda Tadlock Senior Section Administrator

COVER LETTER

Division of Co			
SUBJECT: H2		wink LLC	•
	(Name of Limite	d Liability Company)	
The enclosed Articles o	f Organization and fee(s) are s	ubmitted for filing.	
Please return all corresp	ondence concerning this matte	er to the following:	
RoB	ent John (Schaus	
	(Name of Person)	
Hoc	2 Condition	NINE	
	(Firm/Company)	
5040	Ithaca LN ota 91.		
		(Address)	
Sanesa	eta Il	34343	
<u> </u>	(City	/State and Zip Code)	
		11	
\sim	concerning this matter, please		
KOBERT J.	Schaus	at (<u>94/</u>) <u>893</u> (Area Code & Daytime To	1-5504
(Name	e of Person)	(Area Code & Daytime To	lephone Number)
Enclosed is a check for	or the following amount:		
□ \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<i>,</i>	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	ns

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Effective Date 5 11 07

(Must end with the words "Limited Liability Company,"		C.,")	
ARTICLE II - Address:		_	
The mailing address and street address of the	he principal office of the Limited Liabilit	y Compan	ıy is:
Principal Office Address:	Mailing Address:		
5040 Ithaca LN SARASOTA FL 34343	SAME		
SARASOTA F.C.			
	tourd Office & Desistant Accords Sim		
ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of CBERT J. SOHO THACK	Registered Agent. You must designate an individual of the registered agent are:		SECRETARY OF STATE DIVISION OF CORPORATIONS

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, F.S..

Registered Agent's Signature (REQUIRED)

(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: "MGR" = Manager	Name and Address:
"MGRM" = Managing Member MCR	RoBert J. Schaus DHOZUMEN LD Salasota Fl. 34043
	
(Use attachment if necessary)	•
CLE V: Effective date, if other than the	e date of filing: <u>May//, 2007</u> . (OPTION e specific and cannot be more than five business de

to or 90 days after the date of filing.)

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.)

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)