

L090000004843

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

A. LUNT
JAN 15 2008
EXAMINER

Office Use Only



900140441289

01/14/09--01036--006 **130.00

2009 JAN 14 PM 2:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
FILED

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: WATER CONSERVATION DESIGNS L.L.C.
(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:

DARREN BRIGMOND - MARK WELLS
(Name of Person)

WATER CONSERVATION DESIGNS L.L.C.
(Firm/Company)

P O BOX 578
(Address)

GROVELAND FLORIDA 34736
(City/State and Zip Code)

2009 JAN 14 PM 2:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

For further information concerning this matter, please call:

DARREN BRIGMONT at (352) 636 8877
(Name of Person) (Area Code & Daytime Telephone Number)
MARK WELLS 352 988-3144

Enclosed is a check for 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)

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

WATER CONSERVATION DESIGNS LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

12258 EAST REDWING RD
GROVELAND FLORIDA
34736

Mailing Address:

PO BOX 578
GROVELAND FLORIDA
34736

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

PAUL BRIGMOND

Name

12258 EAST REDWING RD

Florida street address (P.O. Box **NOT** acceptable)

GROVELAND FL 34736

City, State, and Zip

2009 JAN 14 PM 2:35
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

FILED

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.

Paul Brigmond

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

"MGRM" = Managing Member

Name and Address:

MGR

DARRIN BRIGMOND
12258 EAST REDWING RD
GROVELAND FLORIDA 34

MGR

MARK WELLS
8245 BAILEY DRIVE
CLERMONT FLORIDA 34711

(Use attachment if necessary)

2009 JAN 14 PM 2:36
TALLAHASSEE, FLORIDA

FILED

ARTICLE V: Effective date, if other than the date of filing: 1/12/09 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

Mark R Wells

Signature of a member of 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.)

MARK R WELLS

Typed or printed name of signee

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)