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Office Use Only



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COVER LETTER

| TO | Registration Section Division of Corporations |
|-----------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| SUBJE | _{ECT:} Waternote Technologies, LLC |
| | (Name of Limited Liability Company) |
| The en | closed Articles of Organization and fee(s) are submitted for filing. |
| Please | return all correspondence concerning this matter to the following: |
| | Corey J Peterson |
| | (Name of Person) |
| | Waternote Technologies, LLC |
| • | (Firm/Company) |
| | 26 Pine Croft Lane |
| • | (Address) |
| | Palm Coast FL 32164 |
| - | (City/State and Zip Code) |
| For furt | her information concerning this matter, please call: |
| 0 | 004 F40 7040 |
| Core | (Name of Person) at (904) 540-7249 (Area Code & Daytime Telephone Number) |
| | (Mea Code & Daytine Telephone Number) |
| Enclose | ed is a check for the following amount: |
| \$125. 0 | O0 Filing Fee Status S155.00 Filing Fee Status Certificate of Status Certified Copy (additional copy is enclosed) S160.00 Filing Fee, Certificate of Status Status Status Certified Copy (additional copy is enclosed) |
| atil to make | Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301 |



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 24, 2009

CORY J. PETERSON 26 PINE CROFT LANE PALM COAST, FL 32164

SUBJECT: WATERNOTE TECHNOLOGIES, LLC

Ref. Number: W09000008815

We have received your document for WATERNOTE TECHNOLOGIES, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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) 245-6067.

Letter Number: 209A00006466

Neysa Culligan Regulatory Specialist II

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

| The name of the Limited Liability Company is: | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|
| Waternote Technologies, LLC (Must end with the words "Limited Liabili | ty Company "L.I.C." or "L.I.C." |
| | ty company. L.L.C., or EEC.) |
| ARTICLE II - Address: The mailing address and street address of the neithern | incinal office of the Limited Liebility Commons is |
| The maning address and street address of the pri | incipal office of the Limited Liability Company is: |
| Principal Office Address: | Mailing Address: |
| 26 Pine Croft Lane | 26 Pine Croft Lane |
| Palm Coast FL 32164 | Palm Coast FL 32164 |
| | |
| 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 Signature: ered Agent. You must designate an individual or another |
| The name and the Florida street address of the re | |
| Corey J Peterson | 255 u 355 |
| Name | ma 3 |
| 26 Pine Croft Lane | |

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..

City, State, and Zip

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

Registered Agent's Signature (REQUIRED)

Palm Coast

(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:

| MGR" = Manager MGRM" = Managing Member GRM MGR | Corey J Peterson 26 Pine Croft Lane Palm Coast FL 32164 Tim Herlihy 27 Arbor Club Dr #216 |
|---------------------------------------------------|--------------------------------------------------------------------------------------------|
| | 26 Pine Croft Lane Palm Coast FL 32164 Tim Herlihy |
| 1GR | Palm Coast FL 32164 Tim Herlihy |
| MGR | Tim Herlihy |
| MGR | |
| | 27 Arbor Club Dr #216 |
| | |
| | Ponte Vedra Beach FL 32082 |
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| | |
| | |
| Use attachment if necessary) | |
| E V: Effective date, if other than th | e date of filing: (OPTIONAL |
| ective date is listed, the date must | be specific and cannot be more than five business days |
| lays after the date of filing.) | |
| EQUIDED SIGNATURE. | |
| REQUIRED SIGNATURE | / |
| // / | AL SE SE |
| land | In this same 58 \$ |
| Signature of a memi | per or an authorized representative of a member. |
| . 1 | ection 608.408(3), Florida Statutes, the execution |
| of this document constitute that the facts stated | stitutes an affirmation under the penalties of perjury |
| Corey J Pete | erson 52 to |

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)