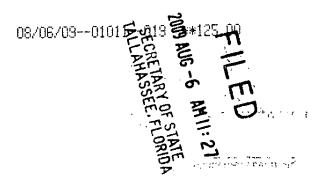
0900076929

(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:			

Office Use Only



900159216969



M. THOMAS

AUG 11 2009

EXAMINER

COVER LETTER

	gistration Section vision of Corporations
SUBJECT	Aquasphere Environmental Consulting, LLC.
	Name of Limited Liability Company
The enclose	ed Articles of Organization and fee(s) are submitted for filing.
Please retur	n all correspondence concerning this matter to the following:
	David Sedota
	Name of Person
	Aquasphere Environmental Consulting, LLC.
	Firm/Company
	Firm/Company 1625 79th Street Causeway #608 Address North Bay Village, FL 33141 City/State and Zip Code davesedota@hotmail.com E-mail address: (to be used for future annual report notification)
	Address
	North Bay Village, FL 33141
	City/State and Zip Code
	davesedota@hotmail.com
For further	E-mail address: (to be used for future annual report notification) information concerning this matter, please call:
i or raranci	intornation concerning this matter, prease can.
	David Sedota at (305) 502-6201
	Name of Person Area Code & Daytime Telephone Number
Enclosed i	s a check for the following amount:
\$125.00 F	Certificate of Status Certificate of Status Certificate of Status Certificate of Status Certificate of Status & Certificat
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Compan	ny is:
Aquasphere Environr	mental Consulting, LLC.
(Must end with the words "Limited	Liability Company," "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of t	he principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address: 로드
20970 SW 398th Street Homestead, FL 33034	Mailing Address: 1625 79th Street Causeway #608 North Bay Village, Fl 33141 tered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or analysis.
The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of	ア
	Name
20970.51	W 398th Street
	(P.O. Box NOT acceptable)
Homestead, FL 33	034 _{FL}
City, St	tate, and Zip
liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and complete accept the obligations of my position as	ad to accept service of process for the above stated limited d in this certificate, I hereby accept the appointment as pacity. I further agree to comply with the provisions of all ete performance of my duties, and I am familiar with and registered agent as provided for in Chapter 608, F.S
Registered Agent's 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:
MGRM	David Sedota 1625 79th Street Causeway #608 North Bay Village, FL 33141
MGRM	Jessica Correa 20970 SW 398th Street Homestead, FL 33034
•	TF S
(Use attachment if necessary)	LARGE BASEE
	e date of filing: (OPTIONAL) be specific and cannot be more than five business also perfectly the specific and cannot be more than five business also perfectly the specific and cannot be more than five business also perfectly the specific and cannot be more than five business also perfectly the specific and cannot be more than five business also perfectly the specific and cannot be more than five business also perfectly the specific and cannot be more than five business also perfectly the specific and cannot be more than five business also perfectly the specific and cannot be more than five business also perfectly the specific and cannot be more than five business also perfectly the specific and cannot be more than five business also perfectly the specific and cannot be more than five business also perfectly the specific and cannot be more than the specific and cannot be considered as the specific and cannot b
REQUIRED SIGNATURE:	soil Salat
(In accordance with se	er or an authorized representative of a member. ection 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury erein are true.)
	David Sedota

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)