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To:

Division of Corporations

Fax Number : (850)617-6393

From:

Account Name : CSE SERVICES, LLC

Account Number : 120070000160 (800)494-3124 Phone

(561)455-9885 Fax Number

FLORIDA/FOREIGN LIMITED LIABILITY CO.

WATERTHINGS LLC

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ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608,F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:

WATERTHINGS LLC

ARTICLE II ADDRESS

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

9 ISABELLA LANE

PORT ST LUCIE, FLORIDA 34952

ARTICLE III REGISTERED AGENT, REGISTEREL OFFICE & REGISTERED AGENT SIGNATURE

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

THOMAS BONGIOVANNI
9 ISABELLA LANE
PORT ST LUCIE, FLORIDA 34952

Having been named as registered agent 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.

THOMAS BONGIOVANNE Registered Agent's signature

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ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more manager and is, therefore, a Manager Managed Company.

ARTICLE V MANAGERS (optional)

MANAGER
THOMAS BONGIOVANNI
9 ISABELLA LANE
PORT ST LUCIE, FLORIDA 34952

MANAGER
SHARON MITCHELL
9 ISABELLA LANE
PORT ST LUCIE, FLORIDA 34952

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.

THOMAS BONGIOVANNI