

06/24/2010 13:13

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LICENSES ETC

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Florida Department of State  
Division of Corporations  
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Division of Corporations  
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
AQUA ARTISANS, LLC

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10 JUN 24 PM 2:55  
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G. MCLEOD  
JUN 25 2010  
EXAMINER

H10000147245 3

**ARTICLES OF CORRECTION  
FOR  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 608.4115, F.S., this document is being submitted within the required 30 business days to correct the attached articles of organization or application to transact business in Florida.

**FIRST:** The name of the limited liability company is:  
Aqua Artisans, LLC

**SECOND:** The articles of organization or the application to transact business

**(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)**



Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:  
Please add an additional MGRM

David Jungclaus

1010 Edgemere Drive

Fort Myers, FL 33919

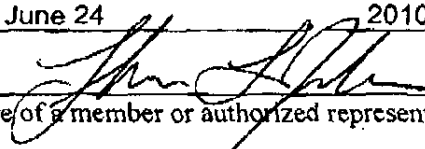
**OR**



Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated: June 24 2010

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

Thomas L. Jackson

\_\_\_\_\_  
Typed or printed name of signee

Filing Fee: \$25.00  
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10 JUN 24 AM 9:28  
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**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

L10000064874  
FILED 8:00 AM  
June 17, 2010  
Sec. Of State  
clewis

**Article I**

The name of the Limited Liability Company is:  
AQUA ARTISANS, LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
8241 LAUREL LAKES BLVD  
NAPLES, FL. US 34119

The mailing address of the Limited Liability Company is:  
8241 LAUREL LAKES BLVD  
NAPLES, FL. US 34119

**Article III**

The purpose for which this Limited Liability Company is organized is:  
ANY AND ALL LAWFUL BUSINESS.

**Article IV**

The name and Florida street address of the registered agent is:  
THOMAS L JACKSON  
8241 LAUREL LAKES BLVD  
NAPLES, FL. 34119

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.

Registered Agent Signature: THOMAS L. JACKSON

**Article V**

The name and address of managing members/managers are:

Title: MGRM  
THOMAS JACKSON  
8241 LAUREL LAKES BLVD  
NAPLES, FL. 34119 US

Signature of member or an authorized representative of a member

Signature: THOMAS L. JACKSON

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June 17, 2010  
Sec. Of State  
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