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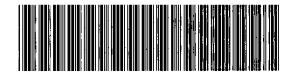
Special Instructions to Filing Officer:

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**EXAMINER** 

Office Use Only



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SECRETARY OF STATE TALLAHASSESS-FLORIBA

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## **COVER LETTER**

|                     | Registration Se<br>Division of Cor         |   |  |                            |  |  |
|---------------------|--|---|--|----------------------------|--|--|
| SUBJEC              | SUBJECT: Consolidated Water Solutions, LLC |   |  |                            |  |  |
| 50000               | Name of Limited Liability Company          |   |  |                            |  |  |
| The enclo           | osed Articles of                           | Organization and fee(s) are   | submitted for filing                                   |                            |  |  |
| Please re           | turn all correspo                          | endence concerning this mat   | ter to the following:                                  |                            |  |  |
| Е                   | dward H                                    | alev  |  |                            |  |  |
|                     |  | <u> </u>  | Name of Person   |                            |  |  |
|                     |  |   |  |                            |  |  |
|                     |  |   | Firm/Company   |                            |  |  |
| 2                   | 2355 Waldemere Street                      |   |  |                            |  |  |
|                     |  |   | Address  |                            |  |  |
| Sa                  | arasota, Fl                                | L 34239   |  |                            |  |  |
|                     | ,  |   | y/State and Zip Code                                   |                            |  |  |
| CC                  | onsolidated                                | watersolutions@ya   |  | d madification)            |  |  |
| Ean Godle           | :  |   | •  | i nourcemon)               |  |  |
| ror turine          | r information co                           | oncerning this matter, please   | e can:   |                            |  |  |
| Paul C              | ). Hsiao                                   |   | - at \/  | 841-3951                   |  |  |
|                     | Name of                                    | Person  | Area Code  | & Daytime Telephone Number |  |  |
| Enclosed            | l is a check for                           | the following amount:   |  |                            |  |  |
| <b>√</b> \$125.00 F | iling Fee                                  | \$130.00 Filing Fee &<br>Certificate of Status  | \$155.00 Filing<br>Certified Cop<br>(additional copy   | y Certificate of Status &  |  |  |
|                     |  | Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Registration<br>Division of<br>Clifton Bu<br>2661 Exec | f Corporations             |  |  |

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I - Name:

The name of the Limited Liability Company is:

# Consolidated Water Solutions, LLC.

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

#### **ARTICLE 11 - Address:**

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

| Principal Office Address: | Mailing Address:      |
|---------------------------|-----------------------|
| Mr. Edward Haley          | Mr. Edward Haley      |
| 2355 Waldemere Street     | 2355 Waldemere Street |
| Sarasota, FL 34239        | Sarasota, FL 34239    |

## 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:

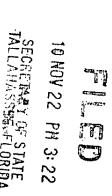
| Mr. Edwa | rd Haley   |
|----------|--|
|          | Name   |
| 2355 W   | aldemere Street                                  |
|          | Florida street address (P.O. Box NOT acceptable) |
| Sarasota | <sub>FL</sub> 34239                              |
|          | City, State, and Zip                             |

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..

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:

| <u>Title:</u>   | Name and Address:   |
|---|---|
| "MGR" = Manager "MGRM" = Managing Membe   | r   |
| MGRM  | Edward Haley  |
|   | 2355 Waldemere Street   |
|   | Sarasota, FL 34239  |
| MGRM  | Paul O. Hsiao   |
|   | 43 Longwood Drive   |
|   | Portland, ME 04102  |
|   |   |
| <del></del>   |   |
|   |   |
|   |   |
|   |   |
|   |   |
|   |   |
| (Use attachment if necessary)   |   |
|   | (OPTIONAL)  |
| ARTICLE V: Effective date, if other th  | an the date of filing: (OPTIONAL)                                 |
| in an enective date is fisted, the date in to or 90 days after the date of filing.) | nust be specific and cannot be more than five business days prior |
| to or 30 days after the date of filling.)   |   |
|   |   |
| REQUIRED SIGNATURE:   |   |

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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

**Edward Haley** 

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)