(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:
,

G. MCLEOD

APR - 7 2011

EXAMINER



200195777562

04/06/11--01012--014 **130.00

COVER LETTER

TO:

TO: Registration Section Division of Corporations
SUBJECT: Water Saver Car Wash, LLC
Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Steve Gaudreau
Name of Person
Steve Gaudreau & Associates, LLC
Firm/Company
13650 Fiddlesticks Blvd, Ste. 202-379
Address
Fort Myers, FL 33912
City/State and Zip Code
steve.gaudreau@hotmail.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Steve Gaudreau at (978) 578-7458
Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \(\subseteq \)\$130.00 Filing Fee \(\chi \) Certificate of Status Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status \(\chi \) Certified Copy (additional copy is enclosed)
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
Water Saver Car Wash, LLC	
(Must end with the words "Limited Liabili	ty Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the pri	ncipal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
13650 Fiddlesticks Blvd, Ste. 202-379 Fort Myers, FL 33912	13650 Fiddlesticks Blvd, Ste. 202-379 Fort Myers, FL 33912
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	
The name and the Florida street address of the re	egistered agent are:
Steve Gaudreau	egistered agent are:
Name	<u> </u>
11269 Pond Cypr	ess Street Francisco
Florida street addr	ress (P.O. Box NOT acceptable)
Fort Myers, FL 33913	

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

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
Steve Gaudreau	MGRM 11269 Pond Cypress Street
	Fort Myers, FL 33913
	
(Use attachment if necessary)	
	e date of filing: April 13, 2011 . (OPTION pe specific and cannot be more than five business d

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.)

Steve Gaudreau

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)