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COVER LETTER

Registration Section

TO:

Division of Co	rporations					
SUBJECT: REDD	ING SALTWATE	R PRODU	CTS LL	С		
	Name of Limited Liability Company					
The enclosed Articles of	Organization and fee(s) are	submitted for filing	; .			
Please return all correspondent	ondence concerning this matt	er to the following:	:			
ROBERT	A REDDING					
, , , , , , , , , , , , , , , , , , , 		Name of Person				
 		Firm/Company				
_		TimeCompany				
1000 RO	CKY RD	Address				
		Address				
STARKE, F		(0	·			
EDIK@WE	cii NERFINANCIAL.CG	y/State and Zip Code				
EKIKWWEI	E-mail address: (to be used f		rt notification)			
For further information of	concerning this matter, please	call:				
ERIK J WEHNER	R EA	at (904	276-7686	;		
Name o	of Person		& Daytime Tel	lephone Number		
Enclosed is a check fo	r the following amount:					
\$125.00 Filing Fee ▼	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filin Certified Cop (additional copy	by .	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registration Division of Clifton Bu 2661 Execution	on Section of Corporation uilding cutive Center ee, FL 32301	าร		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

REDDING SALTWATER PRODUCTS, LLC

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

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:	
1000 ROCKY RD	SAME	
STARKE, FL 32091		
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	registered agent are:	
ERIK J WEHNER EA		። ፲
Name	ASSISTANCE	Γ_
515 COLLEGE D		
Florida street add	dress (P.O. Box NOT acceptable)	5
MIDDLEBURG	FL 32068 골급 3)
City, Sta	ate, 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: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGRM ROBERT A REDDING 1000 ROCKY RD STARKE, FL 32091 (Use attachment if necessary) **ARTICLE V:** Effective date, if other than the date of filing: . (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **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 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.) ROBERT A REDDING 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)