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(Re	questor's Name)	
(110	questor s reame)	•
	ldress)	
(Au	uless)	
· (Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Eiling Officer	
Special instructions to	Filing Onicer.	





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SECRETARIANS OF STATE

N. Culliger NOV 2 7 2012

COVER LETTER

TO: **Registration Section Division of Corporations**

Spring Water VII, 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:

r rease return an corresp	ondence concerning and man	er to the following.	
Nelson	Varajao, Esq	•	
		Name of Person	,
Varajac	Law, P.A.		
		Firm/Company	
5367 S	pring Hill Drive	е	
		Address	
Spring	Hill, FL 34606)	
		y/State and Zip Code	
nelson@v	arajaolaw.com		
	E-mail address: (to be used t	for future annual report notification)	
For further information	concerning this matter, please	call:	
Nelson Va	rajao, Esq.	_at(352)556-52	296
Name	of Person	Area Code & Daytime Telep	
Enclosed is a check for	or the following amount:		
\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & □ Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address	Street/Courier Address	

Registration Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Registration Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Na	ıme:		
	Limited Liability Compa	any is:	
Spring Water VII, LLC	;		
(N	fust end with the words "Limite	ed Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - A	ddress:		
		f the principal office of the Limited Li	ability Company is:
Principal Office	Address:	Mailing Address:	
5367 Spring Hill Drive		5367 Spring Hill Drive	
Spring Hill, FL 34606		Spring Hill, FL 34606	
			
The name and the	Varajao Law, P.A. 5367 Spring Hill Drive	Name Name	FILED 12 NOV 26 AM 10: 13 NOV 26 AM 10: 14 LIANASSEE, FLO
		treet address (P.O. Box <u>NOT</u> acceptable)	21.0 21.0 2.0 2.0 3.1 3.1 3.1 3.1 3.1 3.1 3.1 3.1 3.1 3.1
		ng Hill, FL 34606 City, State, and Zip	20 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
liability compo registered agent all statutes rela	ned as registered agent of any at the place designal t and agree to act in this ting to the proper and c	and to accept service of process for the ted in this certificate, I hereby accept to capacity. I further agree to comply we complete performance of my duties, and as registered agent as provided for it	he appointment as ith the provisions of I I am familiar with

(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:

"MGR" = Manager	
"MGRM" = Managing Member	
iviolati ivianaging iviolitoti	
MGRM	Richard Ackley
	5367 Spring Hill Drive
	Spring Hill, FL 34606
<u> </u>	
(Use attachment if necessary)	
LE V: Effective date, if other than the	e date of filing: (OPTIO t be specific and cannot be more than five busi
LE V: Effective date, if other than the effective date is listed, the date mus	e date of filing: (OPTIO
CLE V: Effective date, if other than the effective date is listed, the date must or 90 days after the date of filing.) REQUIRED SIGNATURE:	e date of filing: (OPTIO to be specific and cannot be more than five busing the specific and cannot be more than the specific and can
CLE V: Effective date, if other than the effective date is listed, the date must or 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a member	er or an authorized representative of a member. 8.408(3), Florida Statutes, the execution of this document or the penalties of perjury that the facts stated herein are true mation submitted in a document to the Department of State by as provided for in s.817.155, F.S.)
LE V: Effective date, if other than the effective date is listed, the date must or 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a member	er or an authorized representative of a member. 8.408(3), Florida Statutes, the execution of this document or the penalties of perjury that the facts stated herein are true mation submitted in a document to the Department of State by as provided for in s.817.155, F.S.)