# 114000004498

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LEINER JAN 0.9 2013

# COVER LETTER

TO: Registration Section Division of Corporations
Koch Water Parks 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:
Adam Reiver
Name of Person
Koch Water Parks
Firm/Company
110 E. Broward Blvd. Suite 1630
Address
Ft. Lauderdale, FL 33301
City/State and Zip Code
adamreiver12@gmail.com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Adam Reiver561 703-5170
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:  \$125.00 Filing Fee \$\ \text{Certificate of Status} \text{S155.00 Filing Fee & Certified Copy (additional copy is enclosed)} V\$

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

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

h Water Parks LLC (Must	end with the words "L	imited Liability Company, "L.L.C.," or "LLC.")
TICLE II - Address: mailing address and st	reet address of the princ	cipal office of the Limited Liability Company is:
ncipal Office Address:		Mailing Address:
E Broward Blvd Sulte 163	0	110 E Broward Blvd Suite 1630
auderdale, FL. 33301		Ft Lauderdale, FL 33301
Limited Liability Con her business entity wit	npany cannot serve as it h an active Florida regi	•
e Limited Liability Con ther business entity wit name and the Florida s	pany cannot serve as it han active Florida regi treet address of the regi	ts own Registered Agent. You must designate an indivisitation.) istered agent are:
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(CONTINUED)

Page 1 of 2

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	
AMBR - INTRINGED	Dan Koch 67 Little Harbor Way Deerfield FL. 33441
MGR	Adam Reiver 10783 Tea Olive Lane Boca Raton, FL 33498
4	
(Use attachment if necessary)	
E V: Effective date, if other than the da	te of filing: (OPTIONAL)  pecific and cannot be more than five business days prior to or 90 da
E V: Effective date, if other than the datective date is listed, the date must be sof filing.)	te of filing: (OPTIONAL)  pecific and cannot be more than five business days prior to or 90 da
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E V: Effective date, if other than the date ective date is listed, the date must be sof filing.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE:	pecific and cannot be more than five business days prior to or 90 da
E V: Effective date, if other than the date ective date is listed, the date must be sof filing.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a m  (In accordance with section constitutes an affirmation)	nember or an authorized representative of a member.  1 605.0203 (1) (b), Florida Statutes, the execution of this document i under the penalties of perjury that the facts stated herein are true.
E V: Effective date, if other than the date ective date is listed, the date must be sof filing.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a magnetic constitutes an affirmation I am aware that any false	pecific and cannot be more than five business days prior to or 90

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)