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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL .
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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01/05/15--01011--007 **160.00



EFFECTIVE DATE

(10/1.15

COVER LETTER

TO:	Registration Division of C		,	
SUBJE	CT: <u>Blackw</u> i	ater Oil Production & Deve Name of Lin	elopment LLC nited Liability Company	
The enc	losed Articles	of Organization and fee(s) a	re submitted for filing.	
Please re	eturn all corres	spondence concerning this m	atter to the following:	
	James E	Polston	Name of Person	
			Name of Person	
	Blackwat	er Oil Production & Devel	opment Firm/Company	
	3119 Apa	ache Drive	Address	
	Pace, FL		City/State and Zip Code	
.iimi	polston@am	ail.com F-mail address: (to be use	d for future annual report notifica	ation)
For furth	ner information	n concerning this matter, ples	•	
James	E Polston	at (;		<u> </u>
	Nam	e of Person	Area Code Daytime Tel	lephone Number
Enclosed	is a check for	r 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)
	Moi	ling Address	Street/Couries Add	* 0.00

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

Blackwater Oil Production & Development 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:
Blackwater Oil Production & Development	Blackwater Oil Production & Developme
3119 Apache Drive	3119 Apache Drive
Pace, FL 32571	Pace, FL 32571

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:

James E Polsto	0		_
	Name		
3119 Apache Di	rive		
Florida street add	dress (P.O. Box	NOT acceptable)	
	•	• •	
Pace		FL 32571	
	City	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 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

<u> Citle:</u>	Name and Address:
AMBR" = Authorized Member	
MGR" = Manager	
MGR	James E Polston
	3119 Apache Drive
	Pace, FL 32571
MGR	Jimmy J Polston
VIGIT.	28 Dogleg Lane
	Durango, CO 81301
	Durango. CO 61301
	
CV: Effective date, if other than the citive date is listed, the date must be	date of filing: <u>January 1, 2015</u> . (OPTIONAL) especific and cannot be more than five business days prior to or
V: Effective date, if other than the crive date is listed, the date must be filling.)	
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