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2015 JAN -5 PM 1: 32 SECRETARY OF STATE TALL AHASSEE, FLORIDA

AGALL 2015

101.16.15

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Blackwater Land & Minerals LLC Name of Limited	Liability Company
(tuile of Billion	chionity company
The enclosed Articles of Organization and fee(s) are sub	mitted for filing.
Please return all correspondence concerning this matter t	o the following:
James E Polston	
Na	me of Person
Disclanator Land 9 Minarala	
Blackwater Land & Minerals Fit	m/Company
	• •
3119 Apache Drive	
	Address
Pace, FL 32571	
City/St	ate and Zip Code
jimpolston@gmail.com	
E-mail address: (to be used for t	uture annual report notification)
For further information concerning this matter, please ca	II:
James E Poiston at (251) 244-0041
	a Code Daytime Telephone Number
Enclosed is a check for the following amount:	
Certificate of Status	S155.00 Filing Fee & S160.00 Filing Fee, Certified Copy ditional copy is enclosed) Certified Copy (additional copy is enclosed)
Mailing Address Registration Section Division of Corporations P.O. Box 6327	Street/Courier Address Registration Section Division of Corporations Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301

Pace

EFFECTIV	EDAIL	*
Jan	1,2015	,
ARTICLES OF ORGANIZATION FOR FLA	ORIDA LIMITED LIABILITY COMPANY	a A
ARTICLE I - Name: The name of the Limited Liability Company is:		ASSEMANT OF
Blackwater Land & Minerals LLC. (Must end with the words "Limited Li	iability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the principal office	ce of the Limited Liability Company is:	TONING SO
Principal Office Address:	Mailing Address:	
Blackwater Land & Minerals 3119 Apache Drive Pace, FL 32571	Blackwater Land & Minerals 3119 Apache Drive Pace, FL 32571	
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own Reanother business entity with an active Florida registration.)	egistered Agent. You must designate an i	ndividual or
The name and the Florida street address of the registered ag	gent are:	
James E Polston Name		
3119 Apache Drive		

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..

FL 32571

Zip

Registered Agent's Signature (REQUIRED)

Florida street address (P.O. Box NOT acceptable)

City

(CONTINUED)

Page 1 of 2

<u>'itle:</u>	Name and Address:
AMBR" = Authorized Member	
'MGR" = Manager	Ismos E Bolston
MGR	James E Polston 3119 Apache Drive
	Pace, FL 32571
	FACE, FL 020/ I
······································	
	
V: Effective date, if other than the date of fi	ling: January 1, 2015 (OPTIONAL)
CV: Effective date, if other than the date of fictive date is listed, the date must be specific filling.)	ling: January 1, 2015 (OPTIONAL) c and cannot be more than five business days prior to or
E V: Effective date, if other than the date of fictive date is listed, the date must be specific filling.) E VI: Other provisions, if any.	ling: January 1, 2015 (OPTIONAL) c and cannot be more than five business days prior to or
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EV: Effective date, if other than the date of fictive date is listed, the date must be specific filling.) EVI: Other provisions, if any. REQUIRED SIGNATURE:	Poll
E V: Effective date, if other than the date of fictive date is listed, the date must be specific filing.) E VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a membe (In accordance with section 605.02 constitutes an affirmation under the	r or an authorized representative of a member. 03 (1) (b), Florida Statutes, the execution of this document penalties of perjury that the facts stated herein are true. on submitted in a document to the Department of State
REQUIRED SIGNATURE: Signature of a membe (In accordance with section 605.02 constitutes an affirmation under the I am aware that any false informatic constitutes a third degree felony as	r or an authorized representative of a member. 03 (1) (b), Florida Statutes, the execution of this document penalties of perjury that the facts stated herein are true. on submitted in a document to the Department of State provided for in s.817.155, F.S.)
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