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| (Red                      | questor's Name)   |           |
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SECRETALY OF STATE

## **COVER LETTER**

|             | Registration Section Division of Corporations   |
|-------------|---|
| SUBJEC      | Thicker Than Water LLC  |
| GODIEC      | Name of Limited Liability Company   |
| The enclo   | osed Articles of Organization and fee(s) are submitted for filing.  |
| Please ret  | rurn all correspondence concerning this matter to the following:  |
|             | Linda G McClarney   |
|             | Name of Person  |
|             | Thicker Than Water  |
|             | Firm/Company  |
|             | PO Box 6  |
|             | Address   |
|             | Palatka, FL 32178-0006  |
|             | City/State and Zip Code wattles@bellsouth.net   |
|             | E-mail address: (to be used for future annual report notification)  |
| For further | information concerning this matter, please call:  |
|             | Linda G McClarney 386 9376057   |
|             | Name of Person Area Code Daytime Telephone Number   |
| Enclosed    | is a check for the following amount:  |
|             | Filing Fee \$\ \text{S130.00 Filing Fee & Certificate of Status} \text{S155.00 Filing Fee & Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} |

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

# Street Address

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| The name of the Limited Liabilit  | ty Company is:   |                                       |  |   |
|---|--|---------------------------------------|--|---|
| Thicker Than Water  | LLC  |                                       |  |   |
| (Must end   | with the words "Limited Li   | ability Company                       | 7, "L.L.C.," or "LLC.")  |   |
| ARTICLE II - Address:   |  |                                       |  |   |
| The mailing address and street ac   | ddress of the principal offic  | e of the Limited                      | Liability Company is:  |   |
| <u>Princip</u>  | al Office Address:   |                                       | Mailing Addre  | <u>:ss</u> :                                |
| Thicker Than Water  |  | <del></del>                           | ker Than Water   |   |
| 110 S Second St   | <del></del>  | _                                     | Box 6  |   |
| Palatka, FL 32177   | Palatka, FL 32177  |                                       | tka, FL 32178-0006   | <del> </del>                                |
| ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a The name and the Florida street:                | cannot serve as its own Reactive Florida registration.)                                  | gistered Agent.                       |  | ividual or                                  |
|   | _  |                                       |  |   |
|   | Linda G McClarney  |                                       |  |   |
|   | N  | ame                                   |  |   |
| •   | 110 S Second St  |                                       |  |   |
|   | Florida street address (P  | .O. Box <u><b>NOT</b></u> a           | cceptable)   |   |
|   | Palatka FL 32177   |                                       | a  |   |
|   | City   | State                                 | Zip  |   |
| Having been named as registered a place designated in this certificate, further agree to comply with the pram familiar with and accept the ob | I hereby accept the appoint ovisions of all statutes relatiligations of my position as r | ment as register<br>ing to the proper | ed agent and agree to act in and complete performance as provided for in Chapter ( | n this capacity. I<br>e of my duties, and I |
|   | 4  | CONTINUED                             |  | - 13 <b>5</b>                               |
|   | (•   | CONTINUED)                            |  | Er S  |
|   |  | Page 1 of 2                           |  | 32 5  |

| Title: "AMBR" = Authorized !                       |  | Member  | Name and Address:  Linda G McClarney  |  |  |
|--|--|---|---|--|--|
| "MGR" = Manager MGR                                |  |   |   |  |  |
|  |  | PO Box 6 Palatka FL 32178   |   |  |  |
|  |  |   |   |  |  |
|  |  |   |   |  |  |
| _  |  |   |   |  |  |
| _  |  |   |   |  |  |
|  |  |   |   |  |  |
| (Use attachment if nec                             |  | ssary)  |   |  |  |
| (If an effec<br>the date of<br><u>Note:</u> If the | tive date is listed, the filing.) he date inserted in this | date must be specific and   | . (OPTIONAL)  cannot be more than five business days prior to or 90 days after  pplicable statutory filing requirements, this date will not be listed as records.                           |  |  |
| the docume   |  |   |   |  |  |
|  | VI: Other provisions, i                                    | fany.   |   |  |  |
| ARTICLE  | Signat<br>Signat<br>Si<br>This do<br>I am aw               | URE:  gnature of a member or cument is executed in accare that any false informat | an authorized representative of a member. ordance with section 605.0203 (1) (b), Florida Statutes. ion submitted in a document to the Department of State s provided for in s.817.155, F.S. |  |  |

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)