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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: JB Water Treatment 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:
Ted A. Cooksey Name of Person
_ JB Water Treatment LLC
Firm/Company
3 Mon Court
Address
Fort Myers, FL 33912
Fort Myers FL 33912 ted Cooks Cy @ yahoo. Com E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Tell Cooksey at (330) 277-1960 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$ Certificate of Status (additional copy is enclosed) \$155.00 Filing Fee \$ Certified Copy (additional copy is enclosed)
Mailing Address Street Address

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The mailing address and street address of the principal office of the Limited Liability Company is:

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

Principal Office Address:

another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

ARTICLE I - Name:

ARTICLE II - Address:

The name of the Limited Liability Company is:

Tell A. Cooksey	
Name Cause	
Florida street address (P.O. Box NOT acceptable)	
Fort Myers, FL. 33912	
City (State 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	
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Mailing Address:

Title:	Name and Address:
"AMBR" ≈ Authorized Member	
"MGR" = Manager AMBRINGR	Ted A. Cooksry 3 Man Court Fort Myers, FL 33912
·	
(Use attachment if necessary)	
CICLE V: Effective date, if other than the date neffective date is listed, the date must be	ate of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90 days a
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