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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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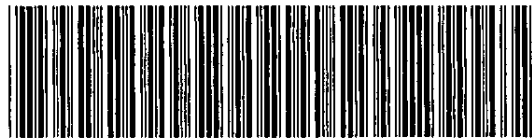
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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April 25, 2017

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

Re: Waters Family Foundation, LLC
Our File No.: 2017-0079

Dear Sirs:

Enclosed please find the original and one copy of the Articles of Organization for the above named entity. After filing, please return a certified copy of the Articles to my office as soon as possible. I have also enclosed a check in the amount of \$155.00 to cover your filing fees, registered agent fee and the cost of obtaining a certified copy.

Thank you for your assistance in this matter. Should you have questions or comments, please contact our office.

Sincerely,



Lauriane Ciccarelli

LAC/sit
Enclosures

**ARTICLES OF ORGANIZATION
FOR FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I – Name:

The Name of the Limited Liability Company is: WATERS FAMILY FOUNDATION, LLC

ARTICLE II – Address:

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

a: Mailing Address: 2400 Bar C Road, Mims, Florida 32754

b: Street Address: 2400 Bar C Road, Mims, Florida 32754

ARTICLE III – Registered Agent, Registered Office & Registered Agent's Signature:

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

Emmett T. Waters

Name

2400 Bar C Road

Florida street address (Post Office Box **NOT** acceptable)

Mims, Florida 32754

City, State and 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

ARTICLE IV – Management (Check applicable box)

The Limited Liability Company is to be managed by one manager or managers and is, therefore, a manager – managed company.

The Limited Liability Company is to be managed by one member or members and is, therefore, member - managed company.

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ARTICLE V –

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

MGR

Emmett T. Waters
2400 Bar C Road
Mims, Florida 32754

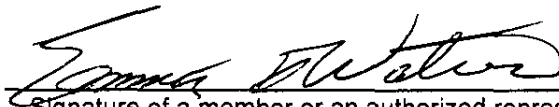
MGR

Leslie C. Mozingo
4315 Woodbourne Drive
Clemmons, North Carolina 27012

ARTICLE VI: Effective date, if other than the date of filing: _____(OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

ARTICLE VI: Other provisions, if any.



Signature of a member or an authorized representative of a member.

(In accordance with section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Emmett T. Waters

Typed or printed name of signee