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DATE: 1/25/18

NAME: STRUCTURAL WATERPROOFING COMPANY, LLC

TYPE OF FILING: ARTICLES

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RETURN: CERTIFIED COPY AND GOOD STANDING PLEASE

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AUTHORIZATION: ABBIE/PAUL HODGE

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TALLAHASSEE, FL 32301**

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Structural Waterproofing Company, 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:

Mary Davis

Name of Person

Burr & Forman LLP

Firm/Company

200 South Orange Avenue, Suite 800

Address

Orlando, FL 32801

City/State and Zip Code

jtillman@ttltp.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mary Davis

407

540-6684

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐

\$125.00 Filing Fee

☐

\$130.00 Filing Fee &
Certificate of Status

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\$155.00 Filing Fee &
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(additional copy is enclosed)

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\$160.00 Filing Fee,
Certificate of Status &
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

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18 JAN 25 PM 12:19
TALLAHASSEE, FL 32301
SECRETARY OF STATE

**ARTICLES OF ORGANIZATION
OF
STRUCTURAL WATERPROOFING COMPANY, LLC**
(a Florida limited liability company)

ARTICLE I – NAME:

The name of the limited liability company is Structural Waterproofing Company, LLC.

ARTICLE II – ADDRESS:

The principal office and mailing address of the limited liability company is 300 Garfield Avenue, Suite 200, Winter Park, Florida, 32789.

ARTICLE III - REGISTERED AGENT:

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

Lee Bolen
300 Garfield Avenue, Suite 200
Winter Park, Florida, 32789

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.



Lee Bolen

ARTICLE IV – MANAGEMENT:

The company shall be a manager-managed company, and the name, address and title of the person authorized to manage and control the company are:

Name: Lee Bolen
Title: Manager
Address: 300 Garfield Avenue, Suite 200
Winter Park, Florida, 32789

AUTHORIZED REPRESENTATIVE:



Lee Bolen

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STATE OF FLORIDA

Structural Waterproofing Company, Inc.
Document Number: 487795
300 Garfield Avenue, Suite 200
Winter Park, Florida 32789

January 25, 2018

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

RE: Structural Waterproofing Company, Inc. (the "Corporation") Consent to Indistinguishable Limited Liability Company Name

To whom it may concern:

Simultaneous with this letter, our representatives have delivered Articles of Organization for Structural Waterproofing Company, LLC, a Florida limited liability company (the "LLC") to the Florida Division of Corporations.

Please accept this letter as the Corporation's written consent to the LLC using "Structural Waterproofing Company, LLC" as the limited liability company name, which is not distinguishable from the Corporation's name.

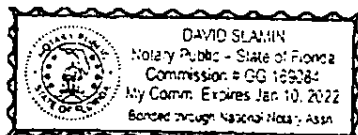
Sincerely,

STRUCTURAL WATERPROOFING
COMPANY, INC.

By: *Larry E. Williams*
Name: Larry E. Williams
Title: President and Sole Shareholder

STATE OF FLORIDA
COUNTY ORANGE

The foregoing instrument was acknowledged before me this 25 day of January, 2018, by Larry E. Williams, as President and Sole Shareholder of Structural Waterproofing Company, Inc., a Florida corporation, on behalf of such corporation. Said person is ☒ personally known to me or ☐ has produced a valid driver's license as identification.



David Slamin
Notary Public
Print Name: David Slamin
My Commission Expires: 1-10-22
My Commission No.: 169084

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TALLAHASSEE, FLORIDA