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PICK-UP	WAIT	MAIL
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(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		





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## FLORIDA DEPARTMENT OF STATE Division of Corporations

September 27, 2018

EDWARD C VALLERY 6332 SE WINDSONG LN STUART, FL 34997

SUBJECT: BLUE WATER ENGINEERING, LLC

Ref. Number: W18000082854

We have received your document for BLUE WATER ENGINEERING, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Letter Number: 218A00019276

Keyna E Page Regulatory Specialist II

www.sunbiz.org

## AKTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:	
EV METALLURGICAL SERVICES, LLC.	
(Must contain the words "Limited Liability	Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of t	he Limited Liability Company is:
Principal Office Address:	Mailing Address:
6332 SE WINDSONG LN.	6332 SE WINDSONG LN.
STUART, FL 34997	STUART, FL 34997
ARTICLE III - Registered Agent, Registered Office, & Registered Liability Company cannot serve as its own Register another business entity with an active Florida registration.)  The name and the Florida street address of the registered agent as	red Agent. You must designate an individual or
EDWARD C. VALERY	

6332 SE WINDSONG LN.
Florida street address (P.O. Box NOT acceptable)

Name

STUART FL. 34997
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)



## ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager MGR	EDWARD C.VALERY 6332 SE WINDSONG LN. STUART, FL. 34997
i effective date is listed, the date must be spate of filing.)	te of filing:
REQUIRED SIGNATURE:	x \ \( \int \)
Colleted	is Jaly
This document is executed any false.	nember or an authorized representative of a member. uted in accordance with section 605.0203 (1) (b), Florida Statutes, se information submitted in a document to the Department of State see felony as provided for in s.817.155, F.S.
This document is executed any false.	nember or an authorized representative of a member.  uted in accordance with section 605.0203 (1) (b), Florida Statutes, se information submitted in a document to the Department of State ree felony as provided for in s.817.155, F.S.
This document is executed a management and fall constitutes a third degree	nember or an authorized representative of a member.  uted in accordance with section 605.0203 (1) (b), Florida Statutes, se information submitted in a document to the Department of State see felony as provided for in s.817.155, F.S.

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)