L20000332894

(Reque	stor's Name)	
(Addres	ss)	
(Addres	ss)	
(City/St	ate/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Busine	ss Entity Na	me)
(Docum	nent Number)
Certified Copies	Certificate	s of Status
Special Instructions to Filin	g Officer:	
		;

Office Use Only



700353094037

10/15/20--01014--005 **160.00

828 GC: 15 PM 5: 12

COVER LETTER

	New Filing Section Division of Corporations		
SUBJECT	T:WATERS EDG	E 103 L.L.C	2 —
	Name of Limited Liability	Company	
The enclose	sed Articles of Organization and fee(s) are submitted for	filing.	
Please retui	urn all correspondence concerning this matter to the follo	owing:	
	GILLIAN L THON	ma 9	
	Name of Per		
	Firm/Comp	any	
	392 ARUBA	CIBCLE HIC	r3
	392 ARUBA	O ((C AL)	
	<u> </u>		
	BRADENTON City/State and Z bgEhomas 1213 E-mail address: (to be used for future annual	FLORIDA 34	209
	City/State and Z	ip Code	
-	bgenomas 1213	3 a notman. C	.0m)
	E-mail address: (to be used for future annu	ial report notification)	
For further in	information concerning this matter, please call:		
[-	GILLIAN L THOMASI (425) Name of Person Area Code	31N 8659	
٢٠٠	Name of Person Area Code	Daytime Telephone Number	
Enclosed is	is a check for the following amount:		
□\$125.00	0 Filing Fee		Filing Fee,
	Certificate of Status Certified (Copy Certificate opy is enclosed) Certified Co	
	(additional of		py is enclosed)
			120 (
	Mailing Address Str	eet Address	120 GC)
		w Filing Section Division	75
	•	c Centre of Tallahassee 15 N. Monroe Street, Suite 810	
			g. <u>3</u>
		;	5: 12
			2

. ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

	ATERS EDGI			
ARTICLE II - Address: The mailing address and street addr	ress of the principal office of th	e Limited Liability	Company is:	
Principal (Office Address:		Mailing Add	dress:
392 ARU #1 BRADENTO	BA CIRCLE 0.3 N FL 34209		<u> - Sam</u>	<u> </u>
ARTICLE III - Registered Agent (The Limited Liability Company ca another business entity with an acti	nnot serve as its own Registere	e red Agent's Sign a d Agent, You must	ature: . designate an i	ndividual or
The name and the Florida street add				
	RYAN	vv THO	maS_	
	Name			
	532 HILLCI	REST I)RIVE	
	Florida street address (P.O. Bo			
	BRADENTON City State	FLOR	ACIS	3420g
	City Stat	te	Zip	ľ
Having been named as registered ago place designated in this certificate. I h further agree to comply with the prov am familiar with and accept the oblig	hereby accept the appointment of isions of all statutes relating to eations of my position as register	is registered agent a the proper and com	and agree to ac plete performa ed for in Chapt	ct in this capacity. I ince of my duties, and I
	(CONT	INUED)		

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
mG R	GILLIAN L THOMAS 372 ABUBA CIRCLE #103 BRADENTON FLA 34209
AMBR	CHARLES W THOMAS 3402 RIVERVIEW Blud BRODENTON FLA 34205
(Use attachment if necessary)	
LEV: Effective date, if other than the ffective date is listed, the date must be of filing.) If the date inserted in this block do	the date of filing: 10/15/2020 (OPTIONAL) it be specific and cannot be more than five business days prior to or 90 days after the applicable statutory filing requirements, this date will not be listed artment of State's records.
LEV: Effective date, if other than the ffective date is listed, the date must of filing.) If the date inserted in this block document's effective date on the Department of the file of the provisions, if any.	est be specific and cannot be more than five business days prior to or 90 days after est not meet the applicable statutory filing requirements, this date will not be listed artment of State's records.
LEV: Effective date, if other than the fective date is listed, the date must be of filing.) If the date inserted in this block document's effective date on the Department.	it be specific and cannot be more than five business days prior to or 90 days after es not meet the applicable statutory filing requirements, this date will not be listed artment of State's records.
LEV: Effective date, if other than the ffective date is listed, the date must of filing.) If the date inserted in this block document's effective date on the Department's effective date on the Department's offective date on the Department's effective date on the Department of the Departm	est be specific and cannot be more than five business days prior to or 90 days after the applicable statutory filing requirements, this date will not be listed artment of State's records.
FLE V: Effective date, if other than to a ffective date is listed, the date must be of filing.) If the date inserted in this block document's effective date on the Department's effective dat	es not meet the applicable statutory filing requirements, this date will not be listed artment of State's records.
FLE V: Effective date, if other than to a ffective date is listed, the date must be of filing.) If the date inserted in this block document's effective date on the Department's effective dat	es not meet the applicable statutory filing requirements, this date will not be listed artment of State's records.
FLE V: Effective date, if other than to a ffective date is listed, the date must be of filing.) If the date inserted in this block document's effective date on the Department's effective dat	es not meet the applicable statutory filing requirements, this date will not be listed artment of State's records.
ILE V: Effective date, if other than to a ffective date is listed, the date must be of filing.) If the date inserted in this block document's effective date on the Department's effective dat	es not meet the applicable statutory filing requirements, this date will not be listed artment of State's records.
CLE V: Effective date, if other than to a feetive date is listed, the date must be of filing.) If the date inserted in this block document's effective date on the Department's effective date	es not meet the applicable statutory filing requirements, this date will not be listed artment of State's records.
CLE V: Effective date, if other than to a feetive date is listed, the date must be of filing.) If the date inserted in this block document's effective date on the Department's effective date	es not meet the applicable statutory filing requirements, this date will not be listed artment of State's records.
CLE V: Effective date, if other than to a feetive date is listed, the date must be of filing.) If the date inserted in this block document's effective date on the Department's effective date	es not meet the applicable statutory filing requirements, this date will not be listed artment of State's records.

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

. . . ,

ARTICLE IV-