### Florida Department of State

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To:

Division of Corporations

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date of submission 7/26

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#### Foreign Limited Liability Company XYLEM WATER SOLUTIONS ZELIENOPLE LLC

Certificate of Status	0
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July 30, 2013

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CT ·

SUBJECT: XYLEM WATER SOLUTIONS ZELIENOPLE LLC

REF: W13000042114

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You failed to make the correction(s) requested in our previous letter.

List the name of the Limited Liability Company on the Certificate of Designation of Registered Agent page.

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) 245-6051.

Neysa Culligan Regulatory Specialist II FAX Aud. #: B13000167242 Letter Number: 113A00018184

CR2E027 (9/10)		cov	er letter	
	ntion Section on of Corporations			
, , , , , , , , , , , , , , , , , , ,	(ylem Water Solut	ions Zelienople LLC		
SUBJECT:		Name of Lim	ited Liability Company	·_·
The enclosed "A Existence, and c	application by Fore	ign Limited Liability Com	pany for Authorization to Transced foreign limited liability	ansact Business in Florida," Certificate y company to transact business in Flork
Please return all	correspondence co	oncerning this matter to the	following:	
	Lawrence Ault			
		Ne	nie of Person	
	Xylem Inc.			
		Fi	m/Company	
	1133 Westchesler Avenue			
			Address	
	White Plains, N	Y 10604		
		City/8t	ate and Zip Code	
	lawarence.nult@	xyleminc.com		
	<u> </u>	E-mail address: (to be used	for future annual report not	fication)
For further infor	mation concerning	this matter, please call:		•
Lawr	ence Ault		914 323-57	
<del></del>	Name o	f Person Area	Code & Daytime Telephon	e Number
Divisio Registr P.O. Bo	ING ADDRESS: n of Corporations ation Section ex 6327 assec, FL 32314	Divisio Registri Clifton 2661 E	TT ADDRESS: n of Corporations ation Section Building accutive Center Circle asee, PL 32301	
		llowing amount:  I \$130.00 Filing Pec & Centificate of Status	译\$155.00 Piling Fee & Certified Copy	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

If name unavailable, enter alternate name adopted for the pronsent of the managers or managing members adopting the Company," "L.L.C," "LLC.")	urpose altern	of transacting business in Florida and attach a copy of the late name. The alternate name must include "Limited Liabil	_ written ity	
Delaware	3.	36-3193091		
(Jurisdiction under the law of which foreign limited liabil company is organized)	ity	(FEI number, if applicable)	-	
01/22/1992	5.	Perpetual		
(Date of Organization)	٠,	(Duration: Year limited liability company will cease to exist or "perpetual")	-	
i			-	
(Date first transacted business (See sections 608.501 & 608.502	n Plori F.S. t	ida, if prior to registration.) o determine penalty liability)	281	
227 South Division Street				
Zelienoplo, PA 16063		का करते. केर्ने क्षेत्र	1 2	=
(Street Add	ress o	f Principal Office)	<del>-</del> ഗ	ក្រា
s. If limited liability company is a manager-mana	ged c	ompany, check here	<b>≩</b> 00	Ò
). The name and usual business addresses of the	าวดทดย	ging members or managers are as follows:	. Ω Ω	
Robert Laird		- بىلى <b>،</b>	0,	
227 South Division Street			_	
Zelienople, PA 16063				
O. Attached is an original certificate of existence, no more the purisdiction under the law of which it is organized. (A phoranslation of the certificate under eath of the translator must be 1. Nature of business or purposes to be conducted.	tocopy subm	ris not acceptable. If the certificate is in a foreign language, a nitted.)	ecords i	'n
Thinks of partitions of partitions to do continue				

Typed or printed name of signee

Erica Flores

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liabil	lity Company is:	
Xylem Water 50	lutions Zelienople LLC	
If unavailable, the alternate to be a	used in the state of Florida is:	
7. The name and the Florida street	et address of the registered agent and office are:	-
2. The liame and the Fiorida sites	a address of the registered agent and office are.	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
	C T Corporation System	
	(Name)	
	1200 South Pine Island Road	28 15
Florid	a Street Address (P.O. Box NOT ACCEPTABLE)	
Plantation	FL 33324	8: 56
	City/State/Zip	- June 1

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 608, Florida Statutes.

By:	CT Corporation	system Connis Brugn
	(Sign	Assistant Secretary
	\$ 100.00 \$ 25.00	Filing Fee for Application Designation of Registered Agent
	\$ 30.00 \$ 5.00	Certified Copy (optional) Certificate of Status (optional)

# Delaware

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "XYLEM WATER SOLUTIONS ZELIENOPLE LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SIXTH DAY OF JULY, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

130923476

You may verify this certificate online at corp.delaware.gov/authvor.shtml

DATE: 07-26-13