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(Business Entity Name)

(Document Number)

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STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

2020 FEB 10 P 2:48

FILED

FEB 11 2020

T. LEMIEUX

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Veolia Water Logistics LLC  
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Whitney Fawcett  
Name of Person  
Veolia Water Logistics LLC  
Firm/Company  
120 Water Street, Suite 212  
Address  
North Andover, MA 01845  
City/State and Zip Code  
whitney.fawcett@veolia.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Whitney Fawcett at ( 978 ) 725-0068  
Name of Contact Person Area Code Daytime Telephone Number

**MAILING ADDRESS:**  
Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**  
Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

- \$125.00 Filing Fee     \$130.00 Filing Fee & Certificate of Status     \$155.00 Filing Fee & Certified Copy     \$160.00 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 27, 2020

WHITNEY FAWCETT  
120 WATER ST STE 212  
N ANDOVER, MA 01845

SUBJECT: VEOLIA WATER LOGISTICS LLC  
Ref. Number: W20000007291

We have received your document for VEOLIA WATER LOGISTICS LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6050.

Tracy L Lemieux  
Regulatory Specialist II

Letter Number: 920A00001891

*See  
Attached.*

*Thx -*

*Whitney  
Fawcett*

*(978) 725-0068*

10:21 AM 01/23/2020

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

*IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:*

1. Veolia Water Logistics LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Delaware (Jurisdiction under the law of which foreign limited liability company is organized)      3. 42-1635429 (FBI number, if applicable)

4. N/A  
(Date first transacted business in Florida, if prior to registration.)  
 (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. <u>53 State Street</u> <small>(Street Address of Principal Office)</small>	6. <u>53 State Street</u> <small>(Mailing Address)</small>
<u>14th Floor</u>	<u>14th Floor</u>
<u>Boston, MA 02109</u>	<u>Boston, MA 02109</u>

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

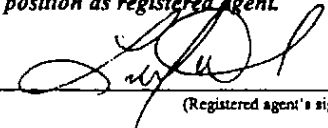
Name: C T Corporation System

Office Address: 1200 South Pine Island Road  
Plantation, Florida 33324  
(City) (Zip code)

2020 FEB 10 P 2:11  
 FILED  
 TALLAHASSEE  
 FLORIDA  
 SECRETARY OF STATE

**Registered agent's acceptance:**  
*Having been named as registered agent and to accept service of process for the above stated limited liability company as the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

**Leslie Martin**  
**Assistant Secretary**

  
(Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

**Title or Capacity:**  **Manager** Name: Brian J. Clarke  
 **Member** Address: 53 State Street  
 **Authorized** 14th Floor  
**Person** Boston, MA 02109  
 **Other** \_\_\_\_\_  **Other** \_\_\_\_\_

**Manager** Name: Daniel Mahoney  
 **Member** Address: 53 State Street  
 **Authorized** 14th Floor  
**Person** Boston, MA 02109  
 **Other** \_\_\_\_\_  **Other** \_\_\_\_\_

**Manager** Name: Jason Salgo  
 **Member** Address: 53 State Street  
 **Authorized** 14th Floor  
**Person** Boston, MA 02109  
 **Other** \_\_\_\_\_  **Other** \_\_\_\_\_

**Title or Capacity:**  **Manager** Name: Whitney Fawcett  
 **Member** Address: 120 Water Street  
 **Authorized** Suite 212  
**Person** North Andover, MA 01845  
 **Other** Asst Secretary  **Other** \_\_\_\_\_

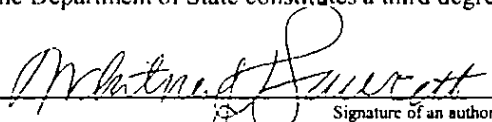
**Manager** Name: \_\_\_\_\_  
 **Member** Address: \_\_\_\_\_  
 **Authorized** \_\_\_\_\_  
**Person** \_\_\_\_\_  
 **Other** \_\_\_\_\_  **Other** \_\_\_\_\_

**Manager** Name: \_\_\_\_\_  
 **Member** Address: \_\_\_\_\_  
 **Authorized** \_\_\_\_\_  
**Person** \_\_\_\_\_  
 **Other** \_\_\_\_\_  **Other** \_\_\_\_\_

**Important Notice:** Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

  
 \_\_\_\_\_  
 Signature of an authorized person

Whitney Fawcett, Assistant Secretary  
 \_\_\_\_\_  
 Typed or printed name of signer

# Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "VEOLIA WATER LOGISTICS 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 SECOND DAY OF JANUARY, A.D. 2020.

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



3817619 8300

SR# 20200022176

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 202106610

Date: 01-02-20