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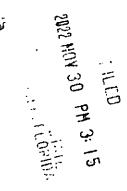
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T. LEIMEUX

DEC 1 3 2022

COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJE	Water Station Management LLC					
Name of Limited Liability Company						
		y Company for Authorization to Transact Business in Florida," Certificate of e referenced foreign limited liability company to transact business in Florida				
Please r	eturn all correspondence concerning this matter	to the following:				
	James R. Ihnot					
		Name of Person				
	James R. Ihnot P.S.					
	Firm/Company					
	410 Market St.					
Address						
	Kirkland, WA 98033					
		City/State and Zip Code				
	jri@jamesrihnot.com					
	E-mail address: (to	be used for future annual report notification)				
For furt	her information concerning this matter, please o	rail:				
	James Ihnot	425 922-9040 at ()				
	Name of Contact Person	Area Code Daytime Telephone Number				
Mailing Address: Registration Section		Street Address: Registration Section				
Division of Corporations		Division of Corporations				
P.O. Box 6327		The Centre of Tallahassee				
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
	Enclosed is a check for the following amount: Please make check payable to: FLORIDA DE \$\Blue{\Boxes}\$ \$125.00 Filing Fee	EPARTMENT OF STATE Fee & □ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate				

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:

Water Station Manager							
	Limited Liability Company; must include "Limite	d Liability Com	pany," "L.L.C.," or "LLC.")			
Creative Technologies LL							
(If name unavailable, enter alternate	name adopted for the purpose of transacting business in I	lorida. The alternat	e name must include "Limited!	Liability Co	ompany," "L	L.C," or "LLC.")	
Washington 2.			1202716				
(Jurisdiction under the law of w	(Jurisdiction under the law of which foreign limited liability company is organized)			(FEI number, if applicable)			
N/A 4.							
4.	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905; F.S. to determ	registration.) line penalty liability)				
2732 Grand Ave, Suite	: 122		Grand Ave. Suite 122				
(Street Address of Principal Office)		o	(Mailing Address)				
Everett, WA 98201		Ever	ett, WA 98201				
				'ar	2.8.2 2.8.2	<u> </u>	
7. Name and street address	ss of Florida registered agent: (P.O. Bo	c <u>NOT</u> accep	table)		, 180 T	ວັງ ພໍ່	
Name:	Michael Cloutier		_			LLU	
Office Address:	2129 Andrea Lane		_			3. ای	
	Ft. Myers		33901 , Florida				
	(City)		(Zip code)				

Registered agent's acceptance:

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 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.

(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:	Name and Address:	Title or Capacity:	Ŋ	ame and Address:
■Manager	Name: Ryan Wear	□Manager	Name:	
□Member	Address: 2732Grand Ave. Suite 122	□Member	Address:	
□Authorized	Everett, WA 98201	□Authorized		
Person		Person		
□Other	Other	□Other		Other
_				
□Manager	Name:	□Manager	Name:	 -
□Member	Address:	□Member	Address:	······
□Authorized		□Authorized		
Person		Person		
□Other		□Other		Other
□Manager	Name:	□Manager	Name:	
□Member	Address;	□Member	Address:	
□Authorized		□Authorized		
Person		Person		<u></u>
□Other	Other	□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

JAMES D. Ihrot





Secretary of State

I, STEVE R. HOBBS, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF EXISTENCE

OF

WATER STATION MANAGEMENT LLC

I CERTIFY that the records on file in this office show that the above named entity was formed under the laws of the State of Washington and that its public organic record was filed in Washington and became effective on 01/25/2016.

I FURTHER CERTIFY that the entity's duration is, and that as of the date of this certificate, the records of the Secretary of State do not reflect that this entity has been dissolved.

I FURTHER CERTIFY that all fees, interest, and penalties owed and collected through the Secretary of State have been paid. I FURTHER CERTIFY that the most recent annual report has been delivered to the Secretary of State for filing and that proceedings for administrative dissolution are not pending.

Issued Date: 11/29/2022 UBI Number: 603 579 883



Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

the R Hobbis

Steve R. Hobbs, Secretary of State

Date Issued: 11/29/2022