

M23000015102

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

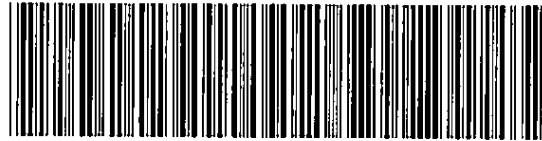
(Document Number)

Certified Copies _____

Certificates of Status _____

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2023 NOV 30 AM 11:26

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2023 NOV 30 PM 2:10

DIRECTOR'S OFFICE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

DEC 01 2023

K. Brumley



CSC - Tallahassee
1201 Hays Street
Tallahassee, FL 32301-2607
850-558-1500, Ext: 61592

To: Department Of State, Division Of Corporations
From: Alexxis Weiland-Sorenson
Ext: 61592
Date: 11/30/23
Order #: 1325503-1
Re: American Water Resources, LLC
Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Authority

Amount to be deducted from our State Account: \$125.00 - FL State Account Number:
I20000000195

AUTH:

A handwritten signature in black ink, appearing to read 'Alexxis Weiland-Sorenson', written over a horizontal line.

Please take the following action:

File in your office on basis

Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: AMERICAN WATER RESOURCES, 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:

MICHELE F. DELACEY

Name of Person

AMERICAN WATER RESOURCES, LLC

Firm/Company

1415 W. DIEHL RD. SUITE 270

Address

NAPERVILLE, IL 60563

City/State and Zip Code

MICHELE.DELACEY@ONCOURSEHOME.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MICHELE DELACEY

630

718-2788

at (_____) _____

Name of Contact Person

Area Code

Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

**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. AMERICAN WATER RESOURCES, 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. VIRGINIA

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 54-0912221

(FEI 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. 1415 W. DIEHL RD. SUITE 270

(Street Address of Principal Office)

6. 1415 W. DIEHL RD. SUITE 270

(Mailing Address)

NAPERVILLE, ILLINOIS 60563

NAPERVILLE, ILLINOIS 60563

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

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee

(City)

Florida

32301

(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.*

Corporation Service Company

By: Alexis Weiland-Janson, ACP

(Registered agent's signature)

2023 NOV 30 AM 11:26

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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:**

☐ Manager Name: AARON COOPER

☒ Member Address: 1415 W. DIEHL RD.

☐ Authorized SUITE 270

Person NAPERVILLE, IL 60563

☐ Other _____ ☐ Other _____

Title or Capacity: **Name and Address:**

☐ Manager Name: COLLEEN GARRITY

☒ Member Address: 1415 W. DIEHL RD.

☐ Authorized SUITE 270

Person NAPERVILLE, IL 60563

☐ Other _____ ☐ Other _____

☐ Manager Name: JOSHUA COHEN

☒ Member Address: 1415 W. DIEHL RD.

☐ Authorized SUITE 270

Person NAPERVILLE, IL 60563

☐ Other _____ ☐ Other _____

☐ Manager Name: MARLO GAAL

☒ Member Address: 1415 W. DIEHL RD.

☐ Authorized SUITE 270

Person NAPERVILLE, IL 60563

☐ Other _____ ☐ Other _____

☐ Manager Name: ERIC J. PALM

☒ Member Address: 1415 W. DIEHL RD.

☐ Authorized SUITE 270

Person NAPERVILLE, IL 60563

☐ Other _____ ☐ Other _____

☐ Manager Name: LUCAS BONSTROM

☒ Member Address: 1415 W. DIEHL RD.

☐ Authorized SUITE 270


Person NAPERVILLE, IL 60563

☐ 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.

DocuSigned by:

 Signature of authorized person

Commonwealth of Virginia



State Corporation Commission

CERTIFICATE OF FACT

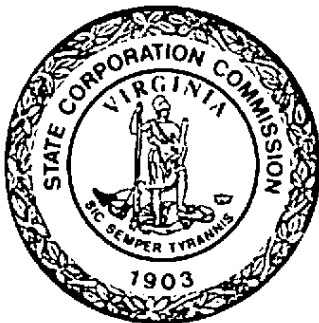
I Certify the Following from the Records of the Commission:

That American Water Resources, LLC is duly organized as a Limited Liability Company under the law of the Commonwealth of Virginia;

That the Limited Liability Company was formed on February 28, 2013; and

That the Limited Liability Company is in existence in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.



Signed and Sealed at Richmond on this Date:

November 30, 2023

A handwritten signature in black ink, appearing to read "Bernard J. Logan".

Bernard J. Logan, Clerk of the Commission