

P/3000094713

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

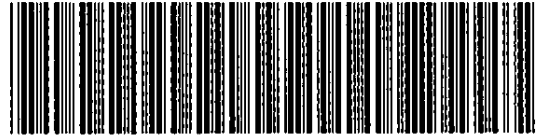
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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DEPARTMENT OF REVENUE

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13 NOV 21 AM 8:30

STATE TALLY OF STATE
TALLAHASSEE, FLORIDA

K 11/22/13



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 893923 7576516

AUTHORIZATION :

COST LIMIT : \$ 70.00

ORDER DATE : November 21, 2013

ORDER TIME : 12:52 PM

ORDER NO. : 893923-025

CUSTOMER NO: 7576516

DOMESTIC FILING

NAME: COMMUNITY UTILITIES OF
FLORIDA INC.

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION
 CERTIFICATE OF LIMITED PARTNERSHIP
 ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - EXT. 52956

EXAMINER'S INITIALS: _____

COVER LETTER

Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: Community Utilities of Florida Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00 \$78.75
Filing Fee Filing Fee
& Certificate of Status

\$78.75 \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
& Certificate of
Status
ADDITIONAL COPY REQUIRED

FROM: Debra A. Plumb
Name (Printed or typed)

2335 Sanders Road
Address

Northbrook, IL 60062
City, State & Zip

847-498-6440
Daytime Telephone number

daplumb@uiwater.com
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME
The name of the corporation shall be: Community Utilities of Florida Inc.

ARTICLE II PRINCIPAL OFFICE
Principal street address: 2335 Sanders Road
Northbrook, IL 60062
Mailing address, if different is: _____

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: To engage in any lawful act or activity for which corporations
may be organized under the laws of the State of Florida

ARTICLE IV SHARES
The number of shares of stock is: 100,000 common shares, no par

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>Lisa Sparrow, Director</u>	Name and Title:	<u>John Stover, Director</u>
Address:	<u>2335 Sanders Road</u>	Address:	<u>2335 Sanders Road</u>
	<u>Northbrook, IL 60062</u>		<u>Northbrook, IL 60062</u>
	_____		_____

Name and Title:	_____	Name and Title:	_____
Address:	_____	Address:	_____
	_____		_____

Name and Title:	_____	Name and Title:	_____
Address:	_____	Address:	_____
	_____		_____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
13 NOV 21 AM 8:30

(cont.)

Name and Title: _____ Name and Title: _____
 Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Corporation Service Company
 Address: 1201 Hays Street
Tallahassee, FL 32301


ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Debra A. Plumb
 Address: 2335 Sanders Road
Northbrook, IL 60062

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 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity
 Corporation Service Company

By:  **Sue G. Knight**
 Required Signature/Incorporator **Assistant Vice President**

11-21-13
 Date

I submit this document and affirm that the facts stated herein are true. I am aware that the 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.


 Required Signature/Incorporator

November 20, 2013
 Date