# State of Missouri

**Robin Carnahan, Secretary of State**

Corporations Division
PO Box 778 / 600 W. Main St., Rm. 322
Jefferson City, MO 65102

File Number:
X01231183
Date Filed: 05/30/2012
Expiration Date: 05/30/2017
Robin Carnahan
Secretary of State

## Registration of Fictitious Name

*(Submit with filing fee of $7.00)*
*(Must be typed or printed)*

This information is for the use of the public and gives no protection to the name being registered. There is no provision in this Chapter to keep another person or business entity from adopting and using the same name. The fictitious name registration expires 5 years from the filing date. (Chapter 417, RSMo)

**Please check one box:**

☒ New Registration ☐ Renewal X _____ Charter number ☐ Amendment X _____ Charter number ☐ Correction X _____ Charter number

**The undersigned is doing business under the following name and at the following address:**

Business name to be registered: LIBERTY UTILITIES

Business Address: 12725 West Indian School Road, D-101
*(PO Box may only be used in addition to a physical street address)*

City, State and Zip Code: Avondale, AZ 85392

**Owner Information:**

If a business entity is an owner, indicate business name and percentage owned. If all parties are jointly and severally liable, percentage of ownership need not be listed. Please attach a separate page for more than three owners. The parties having an interest in the business, and the percentage they own are:

| Name of Owners, Individual or Business Entity | Charter # Required If Business Entity | Street and Number | City and State | Zip Code | If Listed, Percentage of Ownership Must Equal 100% |
|---|---|---|---|---|---|
| Algonquin Water Resources of Missouri, LLC | # LC0608965 | | | | 100% |
| 12725 West Indian School Road, D-101 | | | Avondale, AZ | 85392 | |
| | LC0608965 | | | | |

**All owners must affirm by signing below**

In Affirmation thereof, the facts stated above are true and correct:
(The undersigned understands that false statements made in this filing are subject to the penalties of a false declaration under Section 575.060 RSMo)

Ian Robertson (Manager) — MAY 17, 2012
*Owner's Signature or Authorized Signature of Business Entity* — *Printed Name* — *Date*

*Owner's Signature or Authorized Signature of Business Entity* — *Printed Name* — *Date*

*Owner's Signature or Authorized Signature of Business Entity* — *Printed Name* — *Date*

Name and address to return filed document:

Name: Gregory Sorensen

Address: 12725 West Indian School Road, D-101

City, State, and Zip Code: Avondale, AZ 85392

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Fictitious Creation 1 Page(s)