2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED May 07, 2008 8:00 am Secretary of State

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DOCUMENT # L06000095669 1. Entity Name WHITE SAND GROUP, LLC					05-07-2008 90021 031 ***138.75						
Principal Plac	a of Pusiness	Mailing Address				იიმამ	เมวก				
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	SE SQ BLVD #3-339		1400 VILLAGE SQ BLVD #3-339								
TALLAHASSE	E, FL 32312	TALLAHASSEE, FL 3231	12								
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Principal P	lace of Business - No P.O. Box #	3. Mailing Address									
				1,100,111,041							
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.								
					04162008	Chg-LLC	CH2E	083 (12/06)			
City & State	Δ	City & State			4. FEI Numbe			TAC	plied For		
Only a olan	•	Only & Chart	City of State		20-5640				t Applicable		
7:	0		•		20-3041	3020					
Zip	Country	Zip	Country		5. Certificate	of Status Desired		\$5.00 Add			
								Fee Require	d		
	6. Name and Address of Current	Registered Agent			7. Name and	Address of New	Registered	Agent			
			Name								
ATRIUM R	REGISTERED AGENTS, INC.										
	REMO AVE., SUITE 125		Street A	ddress (P.O. Box Numbe	r is Not Acceptab	ile)				
	ABLES, FL 33146										
0010120	10000,12 00140										
	V		City				FL	Zip Code	е		
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	named entity submits this statement f	or the purpose of changing its r	egistered office of	r register	ed agent, or bot	h, in the State of F	lorida. I am	familiar with,	and accept		
the obligat	ions of registered agent.										
CICNATURE											
SIGNATURE .	Signature, typed or printed name of registered agen	and title if applicable. (NOTE:	Registered Agent signs	ture required	when reinstating)		DATE				
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indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or mar limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes. MANDY

SIGNATUF	RE:	Keerand Slainy									
		PED OR PRINTED	NAME OF	SIGNING	MANAGING	MEMBER,	MANAGER	5 <i>7</i> 7	UTHORIZED	REPRESEN	TATIVE

4/27/2008 Date