

CCRS
103 N. MERIDIAN STREET, LOWER LEVEL
TALLAHASSEE, FL 32301
222-1173

ACCT. #FCA-14

L02000004766

CONTACT: CINDY HICKS

DATE: 2-1-02

REF. #: 0333.5249

CORP. NAME: WTP ENTERPRISES, LLC

- | | | |
|--|---|---|
| <input type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP | <input checked="" type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | <input type="checkbox"/> UCC-1 | <input type="checkbox"/> UCC-3 |
| <input type="checkbox"/> OTHER: _____ | | |

STATE FEES PREPAID WITH CHECK# _____ FOR \$ 155.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED: 400005032924--8
-03/01/02--01055--009
****155.00 ****155.00

COST LIMIT: \$ _____

PLEASE RETURN:

- | | | |
|--|---|---|
| <input checked="" type="checkbox"/> CERTIFIED COPY | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS | | |

Examiner's Initials

APPROVED
AND
FILED
02 MAR - 1 PM 2:43 RECEIVED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
02 MAR - 1 PM 2:12
DEPARTMENT OF STATE
DIVISION OF CORPORATE AND
COMMERCIAL AFFAIRS
TALLAHASSEE, FLORIDA

2-1-02

**ARTICLES OF ORGANIZATION
OF
WTP ENTERPRISES, LLC**

Article I - Name

The name of the Limited Liability Company is:

WTP ENTERPRISES, LLC

Article II - Address

The mailing address and street address of the principal office of the Limited Liability Company is:

1621 Gulf Boulevard #1006
Clearwater, FL 33767

Article III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and street address of the registered agent are:

Frank J. Rief, III, Esq.
442 W. Kennedy Blvd., Suite 340
Tampa, FL 33606

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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.



WILLIS L. JONES

02 MAR - 1 PM 2:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

Article IV - Management

The Limited Liability Company is to be managed by a manager and the name and address of such manager is Willis L. Jones, 76 Sun Valley Drive, St. Louis, MO 63146.

DATED this 20th day of February, 2002.



WILLIS L. JONES

APPROVED
AND
FILED

02 MAR - 1 PM 2:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA