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SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION OF WHITE LIME ASSOCIATES LLC a Florida limited liability company

The undersigned, pursuant to the provisions of Chapter 608 of the Florida Statutes, for the purpose of forming a limited liability company under the laws of the State of Florida do set forth the following:

1. <u>NAME</u>. The name of the limited liability company is WHITE LIME ASSOCIATES LLC (the "Company").

2. <u>MAILING AND STREET ADDRESS OF PRINCIPAL OFFICE</u>. The mailing and street address of the principal office of the Company is: c/o PFP Associates, 1601 Forum Place, Suite 905, West Palm Beach, Florida 33401.

3. <u>REGISTERED AGENT</u>. The name and address of the initial registered agent in the State of Florida, whose Consent to Appointment as Registered Agent accompanies these Articles of Organization are: Arnold Mullen, c/o PFP Associates, 1601 Forum Place, Suite 905, West Palm Beach, Florida 33401.

The undersigned has executed these Articles of Organization on the 21th day of February,

2003.

By:

Amold Mullen, Authorized Representative

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Feb-27-2003 05:48pm From-RUDEN MCCLOSKY

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CERTIFICATION OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

SECRETARY UF STATE TALLAHASSEE, FLORIDA

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: WHITE LIME ASSOCIATES LLC.

2. The name and address of the registered agent and office are:

Arnold Mullen c/o PFP Associates 1601 Forum Place, Suite 905 West Palm Beach, Florida 33401

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 its 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.

Amóld Mullen

Date:

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