

L04000015177

(Requestor's Name)

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☐ PICK-UP

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(Business Entity Name)

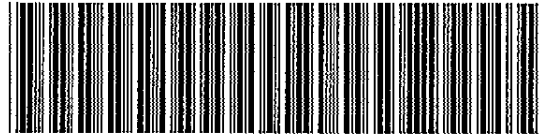
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RECEIVED 04 FEB 26 AM 8:20  
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SECRETARY OF STATE  
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FEDERAL ESTATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

*[Handwritten signature]*

# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Bankers Replat Ue

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- ☐ Art of Inc. File
- ☐ LTD Partnership File
- ☐ Foreign Corp. File
- ☒ L.C. File
- ☐ Fictitious Name File
- ☐ Trade/Service Mark
- ☐ Merger File
- ☐ Art. of Amend. File
- ☐ RA Resignation
- ☐ Dissolution / Withdrawal
- ☐ Annual Report / Reinstatement
- ☐ Cert. Copy
- ☐ Photo Copy
- ☒ Certificate of Good Standing
- ☐ Certificate of Status
- ☐ Certificate of Fictitious Name
- ☐ Corp Record Search
- ☐ Officer Search
- ☐ Fictitious Search
- ☐ Fictitious Owner Search
- ☐ Vehicle Search
- ☐ Driving Record
- ☐ UCC 1 or 3 File
- ☐ UCC 11 Search
- ☐ UCC 11 Retrieval
- ☐ Courier

Signature

Requested by:

Name

Date

Time

Walk-In

Will Pick Up



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

February 25, 2004

CAPITAL CONNECTION

TALLAHASSEE, FL

SUBJECT: BANKER'S REPLAT, LLC  
Ref. Number: W04000007794

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04 FEB 26 AM 8:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

We have received your document for BANKER'S REPLAT, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$130.00 payment.,

Written approval and clearance of the terms BANK, BANKER, BANKING, TRUST COMPANY, BANCSHARES, SAVINGS & LOAN ASSOCIATION, SAVINGS BANK, or CREDIT UNION or words of similar import, must be obtained from the Office of Financial Institutions, pursuant to section 655.922(2a), Florida Statutes.

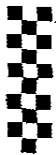
Enclosed is a "Name Approval Request" form to be filled out and sent to the address indicated on the form. If the proposed name is approved by the Office of Financial Institutions, resubmit the document and approval letter to the Division of Corporations for filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr  
Document Specialist

Letter Number: 704A00012575



**LAW OFFICE OF  
JONATHAN JAMES DAMONTE, CHARTERED  
ATTORNEYS AT LAW**

JONATHAN JAMES DAMONTE

NICOLE M. FROST

12110 SEMINOLE BOULEVARD  
LARGO, FLORIDA 33778

TELEPHONE (727)586-2889

TELECOPIER (727)581-0922

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**FAX TRANSMITTAL**

Date: February 26, 2004

COPY [X] will not [ ] will follow by:

TO: **Mr. Buck Kohr, Document Specialist**

**Florida Department of State**

Fax #: **850-4101015**

cc: **Leilani**

**Capital Connection**

Fax #: **850-222-1222**

From: **Fern Zimmer, Paralegal**

Subject: **W04000007794- Banker's Replat, LLC**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

☐ Please Reply    ☐ Sign & fax back    ☐ FYI    ☐ Forward to:

SENDING 4 TOTAL PAGES, INCLUDING THIS COVER PAGE. If you do not receive all pages, if you receive an error code, have a question, or there is a problem with any page in this transmittal, please call our office at 1(727)586-2889, or in Florida, call toll-free at 1(800)550-2889.

**MESSAGE:**

Please find the attached the Articles of Organization of Whiteway Replat, LLC. To expedite the filing, we have changed the name Banker's Replat, LLC to Whiteway Replat, LLC. Please call me if there is any other problem.

Mr. Kohr, as per our conversation, a Certificate of Good Standing will be issued as soon as this company is filed.

Leilani, please fax the Certificate of Good Standing by noon today, February 26, 2004.

The information contained in this transmission is privileged and confidential. It is intended only for the use of the individual or entity named above. If the reader of this message is not the intended recipient, you are hereby notified that any dissemination, distribution or copy of this communication is strictly prohibited. If you have received this communication in error, please notify us immediately by telephone collect call and return the original to us at the above address by U.S. Postal Service. We will reimburse you for the postage.

**ARTICLES OF ORGANIZATION  
OF  
WHITEWAY REPLAT, LLC**

FILED  
04 FEB 26 AM 8  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned, desiring to form a limited liability company under and pursuant to Chapter 608, *Florida Statutes*, does hereby certify as follows:

**ARTICLE I - NAME**

The name of this limited liability company is **Whiteway Replat, LLC** (the "Company").

**ARTICLE II - ADDRESS**

The Company's mailing address and street address of the principal office of the Company is:

**Whiteway Replat, LLC  
8501 Riverside Dr. NE  
St. Petersburg, FL 33702**

**ARTICLE III - MANAGEMENT**

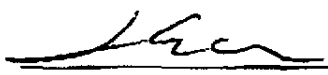
The Company will be manager managed. The initial Manager (the "Managers") of the Company will be:

whose address is: **Joseph E. Nix  
8501 Riverside Dr. NE  
St. Petersburg, FL 33702**

**ARTICLE IV - REGISTERED AGENT AND OFFICE**

The name of the initial registered agent of the Company is: **Jonathan James Damonte**  
and the initial registered agent's street address is: **Jonathan James Damonte, Chartered  
12110 Seminole Blvd.  
Largo, FL 33778**

In Witness Whereof, I have executed these Articles of Organization this 23rd day of February, 2004.

  
Printed Name: Joseph E. Nix  
a Manager

In accordance with §608.408(3), Fla. Stat., the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT AND REGISTERED OFFICE

Pursuant to the provisions of §608.415 or §608.507, Fla. Stat., the undersigned limited liability company submits the following statement to designate a registered office and registered agent in the State of Florida.

1. The name of the limited liability company is: Whiteway Replat, LLC
2. The name and the Florida street address of the registered agent are:

Jonathan James Damonte  
Jonathan James Damonte, Chartered  
12110 Seminole Blvd.  
Largo, FL 33778

Whiteway Replat, LLC

By: [Signature]  
Printed Name: JOSEPH E. NIX  
a Manager

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.

[Signature]  
Printed Name: JONATHAN JAMES DAMONTE

Dated: February 25, 2004