

W05000098512

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

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TALLAHASSEE, FLORIDA

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W05-985
OK

W05-12266
J. BRYAN MAR - 9 2005



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

March 9, 2005

BARBARA L. WHITE
SUSTAINABLE DESIGN
2807 VERONIA DR 3109
PALM BEACH GARDNES, FL 33410

SUBJECT: SUSTAINABLE DESIGN
Ref. Number: W05000012266

We have received your document for SUSTAINABLE DESIGN and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "Ltd. Co." "L.C." or "L.L.C."

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) 245-6043.

Joey Bryan
Document Specialist

Letter Number: 605A0001634

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TALLAHASSEE, FLORIDA

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March 2, 2005

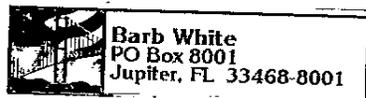
**Florida Department of State
Registration Section
Division of Corporations
PO Box 6327
Tallahassee, Fl 32314**

Dr Sirs:

**The following pages are the Articles of Orgainzation for Limited Liability
Company form:**

**Below is the name and address requested with enclosed check of \$125.00 for the
LLC.**

**Barbara L. White
2807 Veronia Dr. # 109
Palm Beach Gardens, Florida 33410
Daytime Phone number
561-624-2991**



**Thank You,
Barb White
Sustainable Design**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sustainable Design
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Barbara
Barbra L White
(Name of Person)

Sustainable Design
(Firm/Company)

2807 Veronia Dr. # 109
(Address)

Palm Beach Gardens, FL 33410
(City/State and Zip Code)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

Barbara
Barbra L White at (561) 758-1952
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Sustainable Design UC

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

2807 Veronia Dr. # 109
Palm Beach Gardens
FL 33410

P.O. Box 8001
Jupiter, FL
33468

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature

The name and the Florida street address of the registered agent are:

Barbara
~~Barbara~~ L. White

Name

2807 Veronia Dr. # 109

Florida street address (P.O. Box **NOT** acceptable)

Palm Beach Gardens, FL 33410 FL

City, State, and Zip

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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..

Barbara L White

Registered Agent's Signature

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Barbara

~~Barbara~~ L White

2807 Veronia Dr. # 109

Palm Beach Gardens, FL 33410

MGRM

Lester Schwabe

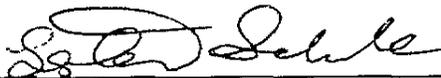
2807 Veronia Dr. # 109

Palm Beach Gardens, FL 33410

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Lester Schwabe

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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