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COVER LETTER

COVERCETTER				
TO: Registration So Division of Co				
SUBJECT: WW	ite ttoss, LLC (Name of Limite	d Liability Company)		
	f Organization and fee(s) are s		· ····	
Please return all corresp	ondence concerning this matte	er to the following:		
	Marshall Maj	Onald. 111. Esq.	1	
	Meyer : McI) on ald Firm/Company)		
1070 E	indiantown	Road Suite 31:	2	
	piter, Floriaa	(Address)		
For further information	concerning this matter, please	call:		
Marshall Mane	Donald (1)	at (541) 748, 2 (Area Code & Daytime Te	233 lephone Number)	
Enclosed is a check for	or the following amount:			
\$125.00 Filing Fee	S130.00 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)	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	s	

ARTICLES OF ORGANIZATION FOR WHITE HOSS, LLC

FILED 06 MAY 15 AM II: 41

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is White Hoss, LLC

ARTICLE II - Address:

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

Principal Office Address: 127 Bryce Lane, Jupiter, Florida 33458

Mailing Address: 127 Bryce Lane, Jupiter, Florida 33458

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

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

Adam S. Gumson, Esq.
Jupiter Law Center
6390 West Indiantown Road, Suite 30
Jupiter, Florida 33458

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 I this capacity. I further agree to comply with the provisions of all statutes relating to the properland 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, Florida Statutes.

Registered Agent's Signature

ARTICLE IV - Managing Members

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

Title:

Name and Address:

MGRM

Stephen N. Britt, Sr. 491 W. 36th Street

Riviera Beach, FL 33404

MGRM

Donna Fiorenza 127 Bryce Lane

Jupiter FL 33458

REQUIRED SIGNATURES

Stephen N. Britt Sr.

(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.)

SECRETARY OF STA