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COVER LETTER

	ration Section on of Corporations				
SUBJECT: _	The White Organization, LLC (Name of Limited Liability Company)				
	(Name of Limited-Liability Company)				
The enclosed A	rticles of Organization and fee(s) are submitted for filing.				
Please return a	correspondence concerning this matter to the following:				
	Paul White				
	Paul White (Name of Person)				
	The White Organization, UC				
	4100 N. Wickham Road, suite 102-122				
	(1.000.00)				
	Melbourne, FL 32935 (City/State and Zip Code)				
	(City/State and Zip Code)				
For further infe	rmation concerning this matter, please call:				
0.	1. hita 221 253 52409				
	(Name of Person) at (321, 253, 5469 (Area Code & Daytime Telephone Number)				
Enclosed is a	check for the following amount:				
□ \$125.00 Fil	ng Fee \$\ \times \\$130.00 \text{ Filing Fee & Certificate of Status} \ \times \ \text{Certified Copy (additional copy is enclosed)} \ \times \ \text{Certified Copy (additional copy is enclosed)} \ \times \ \text{Certified Copy (additional copy is enclosed)} \ \tex				
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301				

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	
The White Organization	on, LCC
(Must end with the words "Limited Liability Company, "Limite	ed Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
4100 N. Wickham Road Suite 102-122 Melbourne, FL 32935	4100 N. WICHAM POAD SUITE 102- DI Melhourne, FL 32935
	registered agent are: ALCAN 26 AM 10: 46 The Creek ST (P.O. Box NOT acceptable) FL 32935
liability company at the place designated in t	accept service of process for the above stated limited this certificate, I hereby accept the appointment as y. I further agree to comply with the provisions of all

(CONTINUED)
Page 1 of 2

Registered Agent's Signature (REQUIRED)

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..

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	Name and Address:	
"MGR" = Manag		
"MGRM" = Man	aging Member	
mer_	Paul White 4100 N. Wicks Melbourne, F	an Road, suite 102-12-
		
	,	
		<u> </u>
	· · · · · · · · · · · · · · · · · · ·	
(Use attachment	f necessary)	
90 days after the da	•	
	Se WHITE	
	Signature of a member or an authorized representative	of a member.
	(In accordance with section 608.408(3), Florida Statutes, to of this document constitutes an affirmation under the penathat the facts stated herein are true.)	Ities of perjury AEC 9
	Paul White	ARE AN
	Typed or printed name of signee	26 SSI
<u>Filing Fees</u> :		[1]
	ee for Articles of Organization and Designation stered Agent	ED Amio: 46 o- state e, florida
\$ 30.00 Certific	d Copy (Optional)	DA G
	ate of Status (Optional)	