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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

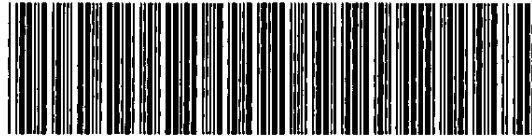
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SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 JUN 15 PM 2:10

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Whitman Investment Group, LLC
(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:

Roger Whitman
(Name of Person)

(Firm/Company)

3681 SW Bimini Circle N.
(Address)

Palm City, FL 34990
(City/State and Zip Code)

For further information concerning this matter, please call:

Roger Whitman at (Home 772 223-7164
cell 561 236-2363)
(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)

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 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: Whitman Investment Group, LLC

Article II – Address

The street address and the mailing address of the principle office of the Limited Liability Company is:
3681 SW Bimini Circle N
Palm City, FL 34990

Article III – Registered Agent

The name and Florida street address of the registered agent are:
Roger M. Whitman
3681 SW Bimini Circle N
Palm City, FL 34990

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.

Registered Agent Signature: _____

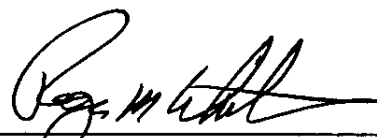

Roger M. Whitman

Article IV – Manager(s) or Managing Member(s)

The name and address of managing members/managers are:

<u>Title</u>	<u>Name and Address</u>
MGR	Roger M. Whitman 3681 SW Bimini Circle N Palm City, FL 34990
MGR	Michelle D. Whitman 3681 SW Bimini Circle N Palm City, FL 34990

Required Signature: _____


Signature of a Member

(In accordance with Section 08.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Roger M. Whitman
Printed Name of Signer

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