# U8000 49055

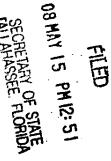
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| PICK-UP                   | ☐ WAIT          | MAIL                                  |
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| Certified Copies          | Certificate     | s of Status                           |
|                           | ,               | )                                     |
| Special Instructions to F | iling Officer:  |                                       |
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Office Use Only



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| TO: Registration Section Division of Corporations              |  |  |
|--|--|--|
| SUBJECT: C WHITE ENTERPRISES LLC                               |  |  |
| (Name of   | f Limited Liability Company)   | •  |
| The enclosed Articles of Organization and fee                  | e(s) are submitted for filing.   |  |
| Please return all correspondence concerning                    | this matter to the following:  |  |
| CARLA WHITE  |  |  |
|  | (Name of Person)   | <del>2</del> %   |
| ·  |  |  |
| C WHITE ENTERPRISES LLC  | (Firm/Company)   |  |
|  | (Filliposinparty)  | ļņ.  |
| 2412 CITRUS AVENUE   |  | Ę  |
|  | (Address)  |  |
|  |  |  |
| SOUTH DAYTONA, FL 32119  |  |  |
| . (  | City/State and Zip Code)   |  |
|  | valence cally  |  |
| For further information concerning this matter                 | , please call:   |  |
| CARLA WHITE at   | (386) 767-5953   |  |
| (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 Statu | e \$155.00 Filing Fee<br>s & Certified Copy<br>(additional copy is enclosed) | \$160.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
| Mailing Address  | Street/Courie  |  |
| Registration Section Division of Corporations                  | Registration S<br>Division of Co   |  |
| P.O. Box 6327  | Clifton Buildin  | •  |

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

### C WHITE ENTERPRISES LLC

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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|--------|-------|---|-----|----|-----|----|
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The name of the Limited Liability Company is:

#### **C WHITE ENTERPRISES LLC**

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C..")

## **ARTICLE II - Address:**

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

| Principal Office Address: | Mailing Address:                               |   |
|---------------------------|--|---|
| C WHITE ENTERPRISES LLC   | C WHITE ENTERPRISES LLC                        |   |
| 2412 CITRUS AVENUE        | 2412 CITRUS AVENUE                             | _ |
| SOUTH DAYTONA, FL 32119   | SOUTH DAYTONA, FL 32119                        | _ |
|                           | egistered Office, & Registered Agent's Signatu |   |

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

| NORMAN WHITE       |   |
|--------------------|---|
| Na                 | ame                                       |
| 2412 CITRUS AVENUE |   |
| Florida street     | t address (P.O. Box <u>NOT</u> acceptable |
| SOUTH DAYTONA      | FL 32119                                  |
| City, Stat         | e, and Zip                                |

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

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

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

| "MGR" = Mana<br>"MGRM" = Ma      | ager<br>naging Member     | Name and Address:  |                       |
|----------------------------------|---------------------------|--|-----------------------|
| MGR                              |                           | CARLA WHITE 2412 CITRUS AVE SOUTH DAYTONA FL 32119   |                       |
|                                  |                           |  |                       |
|                                  | :<br>                     |  | HASSE OF              |
|                                  |                           |  | A CARDA               |
| (Use attachme                    | ent if necessary)         |  |                       |
| an effective date                | e is listed, the date mu  | e date of filing: (OPTION st be specific and cannot be more than fiv   | NAL)<br>e business da |
| or to or 90 days                 | after the date of filing. | .)   |                       |
|                                  | TURE:                     | 2 Juli   |                       |
| QUIRED SIGNAT                    | Carle                     | Muli   |                       |
| <u>QUIRED</u> SIGNA <sup>.</sup> |                           | r an authorized representative of a member.  |                       |
| <u>QUIRED</u> SIGNA <sup>.</sup> | Signature of a member o   | r an authorized representative of a member.  608.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury |                       |

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)