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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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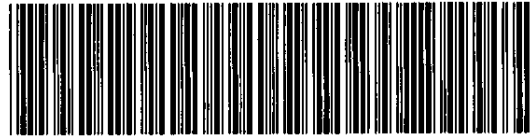
(Business Entity Name)

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# AUSLEY & McMULLEN

ATTORNEYS AND COUNSELORS AT LAW

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P.O. BOX 391 (ZIP 32302)  
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Writer's Direct Line: (850) 425-5457

December 22, 2009

Secretary of State  
2661 Executive Center Circle West  
Tallahassee, Florida 32301

VIA HAND DELIVERY

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Re: **White Willo No. 2, LLC**

Dear Madam/Sir:

Enclosed are an original and one copy of the Articles of Organization for **White Willo No. 2, LLC**, a limited liability company. These Articles include Registered Agent and Registered Office designation for this company. Also enclosed is our client's check to cover the following filing fees:

<input type="checkbox"/> \$125.00 Filing Fee	<input type="checkbox"/> \$130.00 Filing Fee & Certificate of Status	<input checked="" type="checkbox"/> \$155.00 Filing Fee & Certified Copy (additional copy enclosed)	<input type="checkbox"/> \$160.00 Filing Fee, Certified Copy & Certificate of Status (additional copy enclosed)
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Please do not hesitate to call me at (850) 425-5457 if you have any questions. We will have our messenger return to pick up the certified copy and the certificate of filing.

Thank you in advance for your usual assistance in these matters.

Sincerely,



Donna Marie Walters, FRP  
Florida Registered Paralegal

/dmw

Enclosures

sos ltr 20091222 ww 2 llc arts  
016301.81428.

**ARTICLES OF ORGANIZATION  
OF  
WHITE WILLO NO. 2, LLC**

The undersigned, pursuant to the provisions of Chapter 608, Florida Statutes, provides the following information for the purpose of forming a Limited Liability Company under the laws of the State of Florida.

**ARTICLE 1.  
Name**

The name of the Limited Liability Company is **WHITE WILLO NO. 2, LLC.**

**ARTICLE 2.  
Address**

The street and mailing address of the place of business in Florida is:

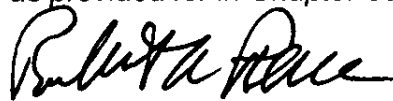
4708 Capital Circle NW  
Tallahassee, Florida 32303-7217

**ARTICLE 3.  
Registered Agent and Registered Office**

The name and Florida street address of the initial registered agent in Florida for the Limited Liability Company are:

**Robert A. Pierce**  
123 South Calhoun Street  
Tallahassee, Florida 32301-1517

*Having been named as registered agent and as the person to accept service of process for the above-stated limited liability company at the place designated in these Articles, 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, Florida Statutes.*



**Robert A. Pierce, Registered Agent**

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**ARTICLE 4.  
Management**

The Limited Liability Company shall be managed by its Member and is, therefore, a Member-managed company.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this 21<sup>st</sup> day of December, 2009.

IN ACCORDANCE WITH SECTION 608.408(3), FLORIDA STATUTES, THE EXECUTION OF THIS DOCUMENT CONSTITUTES AN AFFIRMATION UNDER PENALTIES OF PERJURY THAT THE FACTS STATED HEREIN ARE TRUE.



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**ROBERT A. PIERCE**

Authorized Representative of Member