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	(Requestor's Name)			
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ì	. PICK-UP WAIT MAIL			
	(Business Entity Name)			
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SECRETARY OF STATE
NEW ASSEST OF BRID

B. BOSTICK
MAY 11 2011
EXAMINER

COVER LETTER

TO:	Registration of	on Section Corporations		
SUBJ	_{IECT:} Wh	ite Timber Jupite	r Series V LLC	
		Name of Limi	ted Liability Company	
The e	nclosed Article	es of Organization and fee(s) are	submitted for filing.	
Please	e return all con	respondence concerning this ma	tter to the following:	
	D.S. B	erenson, Esq.		
			Name of Person	TACC 1
	Johans	son Berenson LL	Р	11 MAY 10 SEURARASS
			Firm/Company	
	810 Sa	aturn Street, Suite	16-200	10 PM 2: 1
			Address	F 8 2
	Jupiter,	Florida 33477		0RID
	ما هام ما		ty/State and Zip Code	
	legal@b	luestarcapital.net	for future annual report notification)	
For fu	orther informati	ion concerning this matter, pleas	•	
D.S	. Berenso	on	at (202) 2980755	
	Na	me of Person	Area Code & Daytime Telep	hone Number
Enclo	sed is a checl	k for the following amount:		
\$125.0	0 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 Ci Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

White Timber Jupiter Series V LLC

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

ARTICLE II - Address:

Principal Office Address:

810 Saturn Street, Suite 16-200

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

Mailing Address:

810 Saturn Street, Suite 16-200

Jupiter, Florida 33477	Jupiter, Florida 33477	
	nt, Registered Office, & Registered Agent e as its own Registered Agent. You must designate an indiration.)	
The name and the Florida street a	ddress of the registered agent are:	JALI St.
Dark Timb	er LLC	1 HAY
	Name	
810 Satu	CO D D	
]	Florida street address (P.O. Box NOT acceptable)	
Jupiter	_{FL} 33477	D 12: LOR
	City, State, 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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	White Timber LLC 810 Saturn Street, Suite 16-200 Jupiter, FL 33477
	ALLAH SELECTION OF THE
	FH 2: 11
(Use attachment if necessary)	
	the date of filing: (OPTIONAL) the specific and cannot be more than five business days

Signature of a member or an authorized representative of a member.

(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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

D.S. Berenson

Typed or printed name of signee

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)