

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

((H13000225254 3)))



H130002252543ABCV

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : UCC FILING & SEARCH SERVICES, INC.  
Account Number : I19980000054  
Phone : (850) 681-6528  
Fax Number : (850) 681-6011

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: Vdurand@flinttrust.com

FLORIDA LIMITED LIABILITY CO.  
White Stones, LLC

|                       |          |
|-----------------------|----------|
| Certificate of Status | 0        |
| Certified Copy        | 0        |
| Page Count            | 02       |
| Estimated Charge      | \$125.00 |

RECEIVED  
13 OCT 11 AM 9:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED  
13 OCT 09 PM 4:10  
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help  
J. Shivers OCT 14 2013

UCC SERVICES

Fax:8506816011

Oct 11 2013 13:49

P.01

UCC SERVICES

Fax:8506816011

\*\* Transmit Conf. Report \*\*

P.1

Oct 9 2013 15:11

| Fax Phone Number | Mode   | Start   | Time  | Page | Result | Note |
|------------------|--------|---------|-------|------|--------|------|
| 6176383          | NORMAL | 9:15:11 | 0'36" | 3    | # O K  |      |

**PLEASE HONOR ORIGINAL  
FILE DATE OF 10/9/13**

Division of Corporations Page 1 of 1

**Process Florida Department of State**

**Division of Corporations,**

**Electronic Filing Cover Sheet**

**IT WAS RECEIVED ON 10/9**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H13000225254 3)))



H130002252543ABCY

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : UCC FILING & SEARCH SERVICES, INC.  
Account Number : I19980000054  
Phone : (850) 681-6528  
Fax Number : (850) 681-6011

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: Ydurand@Flinttrust.com

FLORIDA LIMITED LIABILITY CO.

White Stones, LLC

|                       |   |
|-----------------------|---|
| Certificate of Status | 0 |
| 0.00.00.00            | 0 |

(((H13000225254 3)))

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY****ARTICLE I - Name:**

The name of the Limited Liability Company is:

White Stones LLC

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

**ARTICLE II - Address:**

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

**Principal Office Address:**18145 SE Ridgeview DriveTequesta, Florida 33469**Mailing Address:**18145 SE Ridgeview DriveTequesta, Florida 33469**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

(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:

Charles M. Kelly, Jr.

Name

2390 Yamiami Trail North, Suite, #204Florida street address (P.O. Box **NOT** acceptable)Naples, Florida 34103FL

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

(((H13000225254 3)))

**ARTICLE IV- Manager(s) or Managing Member(s):** (((H13000225254 3)))  
 The name and address of each Manager or Managing Member is as follows:

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**MGRMMichael Bahr18145 SE Ridgeview DriveTequesta, Florida 33469\_

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: October 9, 2013. (OPTIONAL)  
 (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**REQUIRED SIGNATURE:**


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.)

Charles M. Kelly, Jr., Registered Agent

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)

FILED  
 13 OCT 06 AM 8:10  
 TALLAHASSEE, FLA