

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

SECRETARY OF STATE
DIVISION OF CORPORATIONS

11 APR 14 PM 4:07

LIMITED LIABILITY
COMPANY
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M02000001230

1. Limited Liability Company's Name

WH Capital, L.L.C.

300199542853
03/28/11--01054--015 **243.75
CR2E041 (1/11)

2. Principal Office Address - No P.O. Box #
3290 Northside Pkwy

Suite, Apt. #, etc.
385

City & State
Atlanta, GA

Zip
30327

Country
USA

3. Mailing Office Address
3290 Northside Pkwy

Suite, Apt. #, etc.
385

City & State
Atlanta, GA

Zip
30327

Country
USA

4. State/Country of Formation
GA/USA

5. Date Organized or Qualified
To Do Business in Florida 5/14/2002

6. FEI Number
58-2597927

Applied For
☒ Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☒ \$5.00 Additional Fee required
for a Certificate of Status

8. Name and Address of Current Registered Agent

Name
BUSINESS FILINGS INCORPORATED

Street Address (P.O. Box Number is Not Acceptable)
1203 GOVERNORS SQUARE BLVD., SUITE 101

Suite, Apt. #, Etc.

City
TALLAHASSEE

State
FL

Zip Code
32301-2960

E-mail Address:

leenunnally@wafflehouse.com
(To be used for future annual report notices)

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

Signature of
Registered Agent

Asst VP of Business Filings Incorporated
REGISTERED AGENT MUST SIGN

Date 3/18/11

10. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
Chairman	Joseph Rogers, Jr.	3290 Northside Pkwy, Ste 385	Atlanta, GA 30327
	REINSTATEMENT 2010, 2011		

300199542853
04/18/11--01001--013 **138.75

11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in Chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that 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.

Signature of Managing
Member/Manager

Date 3/14/11

Daytime Phone # 404-495-1950

Typed or printed name of signing Managing Member/Manager Joseph Rogers, Jr.

Hampton APR 15 2011



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

11 APR 14 PM 4:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

March 31, 2011

WH CAPITAL, L.L.C.
3290 NORTHSIDE PKWY
385
ATLANTA, GA 30327

SUBJECT: WH CAPITAL, L.L.C.
Ref. Number: M02000001230

We have received your document for WH CAPITAL, L.L.C. and check(s) totaling \$243.75. However, the document has not been filed and is being retained in this office for the following reason(s):

There is a balance due of \$138.75. Refer to the attached fee schedule for the breakdown of fees. Please return a copy of this letter to ensure your money is properly credited.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton
Regulatory Specialist II

Letter Number: 811A00007818