Public Access System

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.

(((H060001680743)))

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)205-0383

From:

Account Name : ROGERS, TOWERS, BAILEY, ET AL

Account Number : 076666002273
Phone : (904)398-3911
Fax Number : (904)396-0663

SECRETARY OF STATES

FLORIDA/FOREIGN LIMITED LIABILITY CO

White-Three Rivers L.L.C.

RECEIVED

06 JUN 27 MM 7: 55

11 JUSION OF CORPORATION

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

WO 6-3594

H06000168074

APPLICATION BY POREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

	ree Rivers L.L.C.	of Foreign Limited Li	- Lillian Common			_
	(Name	•		•		
2 Louisiana (Jurisdiction in company is on	eder the law of which forei	3. Instead Hability	20-07188	08 (१६) सम्बद्धितः, १ क्	plicable)	
4. 03/05/20	(Dess of Organization)	5.	Perpetus (Duration) Y exist or "per	El / ser limited Hability petual")	company will coops t	0
e: Obou	Fi ling	acted business in Flor .501 & 608.502 F.S.	ide, if prior to v	ngistration.) nalty liability)		2006 1 SEC
7. <u>337 Mete</u>	airie Road, Suite 2	02	····	 -	2	
Metalrie,	LA 70005	(Street Address o	Principal Offic	(a)	- r	27 ARY
8. If Hunited his	ability company is a m	anager-managed c	ompany, cho	ck here 🗸	:	
9. The name a	nd usual business addı	esses of the mana	ing member	s or managers ar	e as follows:	9: 19 57ATE 0810
Michael B	3. White, Menager		<u>′ </u>	· · · · · · · · · · · · · · · · · · ·		_
337 Mete	irie Road, Sulte 20)2				_
Metalrie,	LA 70005					
hejudelickop und austalica of the ca	cigini omificate of existentic for the law of which this ong emificate under cash of the to rusiness or purposes to	mised. (A phototopy i radiatorment be arbusi	suct acceptable ted.)	. If the certificate is in	a foreign language, a	ecostis in.
		Somber or az auth	arised repres	Chartes of a men	eflescat Acad	

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 of 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1.	The name	of the	Limited	Linhility	Company	r is:
۸.	TIME SERVICE	AF WAY				, ,,,

White-Three Rivers L.L.C.

2. The name and the Plorids street address of the registered agent and office are:

NATHANDER P. Phillips, TR.
(Name)

34 5/9/7 Marsh Drive

Planda Street Address (P.O. BOX NOT ACCEPTABLE)

FERNANCINA BEACHTL 32034

SECRETARY OF STATE

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 eccept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

(Signature)

\$ 100.00 Filing Fee for Application

\$ 25,00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

United States of America State of Louisiana



As Secretary of State, Al Ater, I do hereby Certify that

WHITE-THREE RIVERS, L.L.C.

A limited liability company domiciled in METAIRIE, LOUISIANA,

Filed charter and qualified to do business in this State of March 5, 2004,

I further certify that the records of this Office indicate, the company has paid all fees due the Secretary of State, and so far as the Office of the Secretary of State is concerned, is in good standing and is authorized to do business in this State.

I further certify that this certificate is not intended to reflect the financial condition of this company since this information is not available from the records of this Office.

In testimony whereof, I have hereunto set
My hand and caused the Seal of my Office
To be affixed at the City of Baton Rouge on,
June 19, 2005

Secretary of State



Certificate ID: 20060619006157

To validate this certificate, visit the following web site, go to Commercial Division, Validate Certificate, then follow the instructions displayed.

www.ees.iouteless.gov
