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J. BRYAN

DEC -1 2009

EXAMINER

COVER LETTER

Registration Section

TO:

Division	n of Corporations			
	WBS, LLC a.k.a WBS, LC			
SUBJECT:	Name of Limited Liability Company	-		
	Name of Elimited Elability Company			
	pplication by Foreign Limited Liability Company for Authorization to Transact Business in neck are submitted to register the above referenced foreign limited liability company to trans			
Please return all	correspondence concerning this matter to the following:			
	Finley B. White			
	Name of Person			
	WBS, LC			
	Firm/Company			
		PE	9	
	P.O. Box 2169	FS.	否	
	Address	HASS	ا حد دن	معيدين معيدين
		SSE	0	1
	Ponte Vedra Beach, FL 32004	Ti o	09 NOV 30 PM 2: 5	FILED
	City/State and Zip Code	2.5	بي	0
	Finley white amail com E-mail address: (to be used for future annual report notification)	FLORID	58	
_	E-mail address: (to be used for future annual report notification)	7		
For further inform	mation concerning this matter, please call:			
<u> </u>	Fixley white at (904) 430 - 7555			
	Name of Person Area Code & Daytime Telephone Number			
Divisior Registra P.O. Bo	NG ADDRESS: of Corporations tion Section x 6327 Seee, FL 32314 Seee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			
Enclosed is a	check for the following amount:			
√ \$125.	00 Filing Fee \$\bigcup \\$130.00 Filing Fee & \bigcup \\$155.00 Filing Fee & \bigcup \\$160.00 Filing Fee & \bigcup Certificate of Status	ng Fee, C s & Certif		



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 6, 2009

FINLEY B. WHITE WBS, LC PO BOX 2169 PONTE VEDRA BEACH, FL 32004

SUBJECT: WBS, L.L.C.

Ref. Number: W09000044515



We have received your document for WBS, L.L.C. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a foreign limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations. Therefore, the limited liability company must select an alternate name for use in the state of Florida. Also, please note that adding "of Florida" or "Florida" to the end of the name is not acceptable.

Please insert the alternate name in the space provided on the application form. You must also attach a copy of the written consent ofthe managers or managing members adopting the alternate name for Florida. For your convenience, we are enclosing a fill-in-the-blank form for you to complete and return to our office for processing.

The alternate name must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The word "Limited"may be abbreviated as "Ltd." and the word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable limited liability company suffixes in Florida: "Limited Company," "L.C.," and "LC."

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

Please return your document, along with 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) 245-6043.

Joey Bryan Regulatory Specialist II

Letter Number: 609A00032243

FILED

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SECRETARY OF STATE
ALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 15, 2009

FINLEY B. WHITE WBS, LC PO BOX 2169 PONTE VEDRA BEACH, FL 32004

SUBJECT: WBS, L.L.C.

Ref. Number: W09000044515



You failed to make the correction(s) requested in our previous letter.

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with 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) 245-6043.

Joey Bryan Regulatory Specialist II

Letter Number: 609A00032243

WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

We, the undersigned, do hereby certify that we are the Managers and/or M	anaging	
Members of WBS, L, C. (Name of Limited Liability Company)	72SE	
(Name of Limited Liability Company)	58	(
a limited liability company duly organized and existing under the laws of	HASS	•
Vincinus	MO	
(State or Country of Organization)	TIS	ı
,	25	•
(State or Country of Organization) Because the name of this foreign limited liability company does not satisfy	the Br	4
requirements of the s. 608.406, F.S., the limited liability company hereby a	dopts th	e
following name to transact business in the state of Florida:		
(Name to be used by limited liability company in Florida. NOTE: Name must end with Limited Lia Company, L.L.C., or LLC.)	ability	
Date: 10/13/09		
Signature(s) of Manager(s) and/or Managing Member(s):		
Fregue		
	~	_
		_
		-
		_
		-
		_

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1	WBS, LLC a.k.a WBS, LC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
cons	ent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability pany," "L.L.C," "LLC.")	ritten '
2.	Virginia 3. 26-3788878	
(J	Virginia 3. 26-3788878 urisdiction under the law of which foreign limited liability (FEI number, if applicable) mpany is organized)	
1	(Date of Organization) 5. 12/31/2023 53 6 7 (Duration: Year limited liability company will cease to -	
5		77
·· -		J
7		
	Porte Vedra Beach FL 32082 (Street Address of Principal Office)	
-	(Street Address of Principal Office)	
	The name and usual business addresses of the managing members or managers are as follows: Finley B. White P.O. Box 2169 Ponte Vedra Beach, FL 32004	
-		
юju	attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of record risdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a ation of the certificate under oath of the translator must be submitted.)	ds in
1.	Nature of business or purposes to be conducted or promoted in Florida:	-
	Jack Ruysk	
	Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)	
	Finley B. White	
	Typed or printed name of signee	

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 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 Liability	Company is:		
WRS. (C			
If unavailable, the alternate to be use	d in the state of Florida is:		
	a in and state of a forten so.		
"HVPV-WBS, LLC	·		
2. The name and the Florida street a	ddress of the registered agent and office are:		
	•	09 NOV 30 SECRETAR SECRETAR ALLAHASS	
<u></u>	C T Corporation System	_£6 0	
	(Name)	30 AR ASS	FT C
	1200 South Pine Island Road	E. P	FE
Florida St	reet Address (P.O. Box NOT ACCEPTABLE)		
		72 5 8	
Plantatio	n FL 33324	→	
	City/State/Zip		
liability company at the place designa agent and agree to act in this capacity relating to the proper and complete pe obligations of my position as registere C T Corporation System	nt and to accept service of process for the above ted in this certificate, I hereby accept the appoint. I further agree to comply with the provisions of my duties, and I am familiar with a dagent as provided for in Chapter 608, Floridation of Bryan	intment as regis of all statutes a and accept the	stered
,	200.00 Filing Fee for Application 25.00 Designation of Registered Agent 30.00 Certified Copy (optional) 5.00 Certificate of Status (optional)		

"Commonwealth of Urginia



State Corporation Commission

I Certify the Following from the Records of the Commission:

A certificate of organization was issued by the Commission to WBS, L.C., a limited liability company formed under the laws of VIRGINIA, effective as of September 09, 1993.

As of the date below, articles of cancellation have not been filed in this office by WBS, L.C., a Virginia limited liability company.

Nothing more is hereby certified.

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Signed and Sealed at Richmond on this Date: June 17, 2009

Joel H. Peck, Clerk of the Commission