TRANSMITTAL LETTER



Tallahassee, FL 32314	,		÷
SUBJECT: White SANDS GR. (Proposed corpora	OUP, THE. ate name - must include suf	fix)	r i
Enclosed is an original and one(1) copy of the article	es of incorporation and a	200003099 -01/14/000 *****87.50 a check for :	392 1070013 *****87.51
\$70.00 \$78.75 Filing Fee Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
FROM: Thomas Stander (Pr	evens	4-	ŧ
PO BOX 13			
Shingle Spr Gity,	rings ; Ca. State WZip	95682-85	19
530)672-069 Daytime T	74 /FAX (530) Telephone number		
		JAN 14 PM 3.	FILED
Shingle Spr City, (530) 672-069 Daytime To		JAN 14 PM 3	

(AK) 1400

ARTICLES OF INCOPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE 1 NAME

The name of the corporation shall be: White Sands Group, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place eof business and mailing address of this corporation shall be:

8216 Hampshire Drive Sebring, Fl. 33870

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is 1500 shares.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are: Alan D. Williams 8216 Hampshire Drive Sebring, Fl. 33870

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are: Thomas Stevens PO BOX 1323

Shingle Springs, CA 95682-8519

Signature/Incorporator

Date

Having been named as registered agent and to accept service of process for the above stated corporation 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.

Signature/Registered Agent

Date