P91800095668

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT:	White	Cliff (Proposed	Corporate name - must include	agement,	Inc.
			1	1 00002341 -11/07/97(*****78.75	
Enclosed is an original and one(1) copy of the articles of incorporation and a check for:					
\$70.00 Filing Fee		\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	
-			ADDITIONAL CO	OPY REQUIRED	
F	ROM:	William Name (1	Walker Printed or typed)	SEGRI	97 NOV
			26th AUE	ASSEE, FI	-7 PE D
Ocala, FL 34470 City, State & Zip				OR DE CORRES	2: 16
352-840-0258 Daytime Telephone number					

NOTE: Please provide the original and one copy of the articles.

ne 11/7/97

ARTICLES OF INCORPORATION

FILED

97 NOV -7 PM 2: 16

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business CT OF STATE TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

White Cliff Capital Management, Inc.

ARTICLE II PRINCIPLE OFFICE

The principle place of business and mailing address of this corporation shall be: 626 NE 26th Ave, Ocala, Florida, 34470.

ARTICLE III SHARES

The total authorized capital stock of the corporation is One Thousand (1000) shares of common stock having a Par Value of One Dollar (\$1.00).

ARTICLE IV REGISTERED OFFICE AND REGISTERED AGENT

The name and Florida street address of the initial registered agent are:

William Walker 626 NE 26th Ave

Ocala, FL, 34470

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

William Walker

626 NE 26th Ave

Ocala, FL, 34470

William Walker, Incorporator

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.

10/24/

Registered Agent