

LOG 00009 6977

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

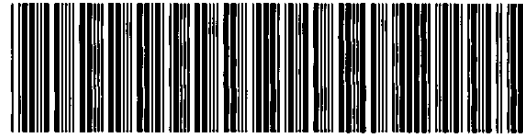
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



600080078606

10/04/06--01002--007 \*\*160.00

FILED 20  
06 OCT - 3 AM 10:29  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
2006 OCT - 3 PM 3:47  
NOT RECORDED  
TO ACKNOWLEDGE  
SUFFICIENCY OF FILING

CORPDIRECT AGENTS, INC. (formerly CCRS)  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301  
222-1173

FILING COVER SHEET  
ACCT. #FCA-14

**FILED**  
06 OCT -3 AM 10:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CONTACT: KATIE WONSCH  
DATE: 10/03/06  
REF. #: 000672.58396  
CORP. NAME: BARDMOOR GOLF, LLC

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> ARTICLES OF INCORPORATION   | <input type="checkbox"/> ARTICLES OF AMENDMENT  | <input type="checkbox"/> ARTICLES OF DISSOLUTION      |
| <input type="checkbox"/> ANNUAL REPORT               | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME              |
| <input type="checkbox"/> FOREIGN QUALIFICATION       | <input type="checkbox"/> LIMITED PARTNERSHIP    | <input checked="" type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT               | <input type="checkbox"/> MERGER                 | <input type="checkbox"/> WITHDRAWAL                   |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION |   |   |
| <input type="checkbox"/> OTHER:                      |   |   |

STATE FEES PREPAID WITH CHECK# 518670 FOR \$ 160.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

\_\_\_\_\_ COST LIMIT: \$ \_\_\_\_\_

PLEASE RETURN:

- |   |   |   |
|---|---|---|
| <input checked="" type="checkbox"/> CERTIFIED COPY        | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input type="checkbox"/> PLAIN STAMPED COPY |
| <input checked="" type="checkbox"/> CERTIFICATE OF STATUS |   |   |

Examiner's Initials

**FILED**  
06 OCT -3 AM 10:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION  
OF  
BARDMOOR GOLF, LLC**

**ARTICLE I**

The name of the limited liability company formed hereby is **BARDMOOR GOLF, LLC** (the "Company").

**ARTICLE II**

The duration of the Company shall be perpetual, unless sooner dissolved.

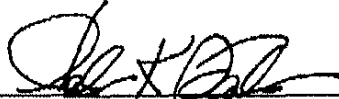
**ARTICLE III**

The mailing address and street address of the principal office of the Company is: 10688-C Crestwood Drive, Manassas, Virginia 20109.

**ARTICLE IV**

The name and address of the Registered Agent in the State of Florida is: Charles K. Staples, 18086 S.E. Village Circle, Tequesta, Florida 33469.

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



Charles K. Staples

**ARTICLE V**

The Company is to be managed by a Board of Managers. The name and address of each Manager on the Board of Managers is as follows:

Kimberly R. Smith	8117 Willingboro Court Gainsville, VA 20155
Walter Whitfield Staples	12307 S.E. Birkdale Tequesta, FL 33469
Michael L. Miraglia	9315 N.W. 48 <sup>th</sup> Doral Terrace Miami, FL 33178

Executed this 28 day of September, 2006.

**MEMBER:**

FORE GOLF ASSOCIATES IV, LLC,  
a Virginia limited liability company,

By: 

Michael L. Miraglia, Manager