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JOHN A. DARLSON

MAILING ABDRESS: P. O. DRAWER 2315

STUART, FLORIDA 34995

TELEPHONE 561 287-6090 FAX: 561 287-6095

June 26, 2000

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

Re: Florida Outdoors, L.L.C.

Dear Sir/Madam:

L-7871

900003308009--5 -06/28/00--01075--002 \*\*\*\*160.00 \*\*\*\*160.00

Please find enclosed the original and one (1) copy of the Articles of Organization for Florida Outdoors, L.L.C., a Florida limited liability company.

Also enclosed is my check in the amount of \$160.00 for the following fees: filing fee (\$125.00); certified copy of articles (\$30.00) and certificate of existence (\$5.00). Please return the certified copy to P.O. Drawer 2315, Stuart, FL 34995.

Kind regards and good wishes.

Sincerely,

John A. Darlson

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

# ARTICLES OF ORGANIZATION FOR FLORIDA OUTDOORS, L.L.C.

# A Florida Limited Liability Company

### ARTICLE I

#### NAME

The name of the Limited Liability Company is: FLORIDA OUTDOORS, L.L.C.

#### ARTICLE II

## **ADDRESS**

The mailing address and street address of the principal of the Limited Liability Company is:

1150 S.E. Federal Highway Stuart, Florida 34994

#### ARTICLE III

# REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S SIGNATURE

The name and the Florida street address of the Registered Agent are:

John A. Darlson, Esquire 1684 S.W. Boatswain Place Palm City, Florida 34990

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.

Registered Agent's Signature John A. Darlson, Esquire

# ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager-managed company.

Signature of a member of an authorized representative of a member JOSEPH SIMOES, as President, OKANAGAN RV CENTRE, LTD.

(In accordance with Section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true)

JOSEPH SIMOPS, as President, OKANAGAN RV CENTRE, LTD.

SECRETARY OF STATE TALL AHASSEE FLARIBA