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Zimmer & Lawson Accounting Service
2403 State Street
Tampa, Florida 33609

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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____ (Corporation Name) _____ (Document #)
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

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FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

June 7, 2000

MONICA Z. LAWSON
ZIMMER & LAWSON
2403 STATE STREET
TAMPA, FL 33609

SUBJECT: PIONEER AMUSEMENTS, L.L.C.
Ref. Number: W00000014445

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TALLAHASSEE, FLORIDA

We have received your document for PIONEER AMUSEMENTS, L.L.C. and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective October 1, 1999, Chapter 608, Florida Statutes, does not require or permit the filing of an "Affidavit of Membership and Capital Contributions." Therefore, the enclosed document has not been filed and is being returned to you.

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) 487-6020.

Tammi Cline
Document Specialist

Letter Number: 600A00032219



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

August 30, 2000

MONICA Z. LAWSON
ZIMMER & LAWSON
2403 STATE STREET
TAMPA, FL 33609

SUBJECT: PIONEER AMUSEMENTS, L.L.C.
Ref. Number: W00000014445

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for PIONEER AMUSEMENTS, L.L.C. and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 487-6020.

Tammi Cline
Document Specialist

Letter Number: 400A00046370

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I NAME

THE NAME OF THE LIMITED LIABILITY COMPANY IS:

PIONEER AMUSEMENTS, L.L.C.

ARTICLE II ADDRESS

**THE MAILING ADDRESS AND STREET ADDRESS OF THE PRINCIPAL OFFICE
OF THE LIMITED LIABILITY COMPANY IS: 11613 E. BAY RD.
GIBSONTON, FL. 33534**

ARTICLE III DURATION

**THE PERIOD OF DURATION FOR THE LIMITED LIABILITY COMPANY
SHALL BE; PERPETUAL**

ARTICLE IV STATEMENT OF PURPOSE

**PURPOSES: TO ENGAGE IN THE OUTDOOR AMUSEMENT BUSINESS, WHICH
WILL INCLUDE THE OPERATIONS OF RIDES AND CONCESSIONS. THE FOREGOING
PURPOSES AND ACTIVITIES WILL BE INTERPRETED AS EXAMPLES ONLY AND NOT
AS LIMITATIONS, AND NOTHING THEREIN SHALL BE DEEMED AS PROHIBITING THE
LLC FROM ENGAGING IN ANY LAWFUL ACT OR ACTIVITY FOR WHICH AN LLC MAY
BE ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA.**

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TALLAHASSEE, FLORIDA**

ARTICLE V MANAGEMENT

THE LIMITED LIABILITY COMPANY IS TO BE MANAGED BY THE MEMBERS
AND THE NAMES AND ADDRESSES OF THE MANAGING MEMBERS ARE:

GIFFORD M. SOUTER
11613 E. BAY RD.
GIBSONTOWN, FL. 33524



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TALLAHASSEE, FLORIDA

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ARTICLE VI MEMBERS RIGHTS TO CONTINUE BUSINESS

THE RIGHT IF GIVEN OF THE REMAINING MEMBERS OF THE LIMITED
LIABILITY COMPANY TO CONTINUE THE BUSINESS ON THE DEATH, RETIREMENT,
RESIGNATION, EXPULSION, BANKRUPTCY, OR DISSOLUTION OF A MEMBER OR
THE OCCURRENCE OF ANY OTHER EVENT WHICH TERMINATES THE CONTINUED
MEMBERSHIP

OF A MEMBER IN THE LIMITED LIABILITY COMPANY.

(IN ACCORDANCE WITH SECTION 608.4083 FLORIDA STATUTES, THE EXECUTION OF THIS AFFIDAVIT
CONSTITUTES AN AFFIRMATION UNDER THE PENALTIES OF PERJURY THAT THE FACTS STATED
HEREIN ARE TRUE)

**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.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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1. THE NAME OF THE LIMITED LIABILITY COMPANY IS: PIONEER AMUSEMENTS, L.L.C.
2. THE NAME AND THE FLORIDA STREET ADDRESS OF THE REGISTERED AGENT ARE;

MONICA ZIMMER LAWSON
ZIMMER & LAWSON ACCOUNTING SERVICE
2403 STATE STREET
TAMPA, FLORIDA 33609

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.



MONICA ZIMMER LAWSON