100000011226

September 5, 2000

COOOO3385686--3 -09/07/00--01069--014 ****160.00 ****160.00

W-22054

To Whom It May Concern:

Please receive this correspondence as the official registration 'cover letter' for GolfHomes.com, LLC.

Name: GolfHomes.com, LLC

Address: 1260 S.W. Maplewood Dr.

Port St. Lucie, FL 34986

Day Phone: 561-871-7958

Thank You,

Alice G. Bingel

Registered Agent

FILED

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SECRETARY OF STATE
TALL AHASSEF FLORID.

min 9/19



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

September 8, 2000

GOLFHOMES.COM, LLC % ALICE BINGEL 1260 S.W. MAPLEWOOD DR. PORT ST LUCIE, FL 34986

SUBJECT: GOLFHOMES.COM, LLC

Ref. Number: W00000022054

We have received your document for GOLFHOMES.COM, LLC and your check(s) totaling \$160.00. 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) 487-6097.

Michael Mays Document Specialist

Letter Number: 200A0004759

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
GoffHomes, com, LLC
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: 1260 S.W. MAPLEWOOD DR. PORT ST. LUCIE, FL 34986
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
ALICE G. BINGEL
Name 1260 S.W. MAPLEWOOD DR. Florida street address (P.O. Box NOT acceptable) PORT ST. LUCIE FL 34986 City, State, and Zip
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, F.S
Registered Agent's Signature
Registered Agent's Signature
Article IV - Management (Check box if applicable.)
The Limited Liability Company is to be managed by one manager or more manages and is,
therefore, a manager - managed company. SAY → 「 FOR NOTE OF ST O
(An additional article must be added if an effective date is requested) \(\overline{\text{N}}\)
Signature of a member or an authorized representative of a member.
(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.)
Typed or printed name of signee
FILING FEES: \$ 100.00 Filing Fee for Articles of Organization \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (OPTIONAL) \$ 5.00 Certificate of Status (OPTIONAL)