



# L0100 0015746

ACCOUNT NO. : 072100000032

REFERENCE : 472238 10463A

AUTHORIZATION :

*Patricia Pigute*

COST LIMIT : \$ 155.00

ORDER DATE : September 14, 2001

ORDER TIME : 10:15 AM

ORDER NO. : 472238-005

CUSTOMER NO: 10463A

CUSTOMER: Ms. Larissa K. Lincoln  
Cohen Norris Scherer  
Weinberger & Wolmer  
Suite 400  
712 U.s. Highway 1  
North Palm Bch, FL 33408-7146

*Effective Date  
Sept. 12, 2001*

NOTED  
TO ACKNOWLEDGE  
SUFFICIENCY OF FILING

2001 SEP 14 AM 11:32

RECEIVED  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

DOMESTIC FILING

NAME: WALKABOUT GOLF & COUNTRY CLUB,  
LLC

EFFECTIVE DATE:

000004588510-10

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

CONTACT PERSON: Norma Hull - EXT. 1115

EXAMINER'S INITIALS:

*JB  
9-14-01*

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

01 SEP 14 PM 12:19

FILED

APPROVED  
AND  
FILED

**ARTICLES OF ORGANIZATION OF  
WALKABOUT GOLF & COUNTRY CLUB, LLC**

The undersigned hereby forms and establishes a limited liability company pursuant to Chapter 608, Florida Statutes as follows:

**ARTICLE I**

The name of this limited liability company is WALKABOUT GOLF & COUNTRY CLUB, LLC.

**ARTICLE II**

This limited liability company shall have perpetual existence from the DATE OF SIGNING of these Articles of Organization, being September 12, 2001, unless sooner terminated as provided in the Operating Agreement executed or to be executed by the members..

**ARTICLE III**

The mailing address and street address of the principal place of business of this limited liability company is 2500 Quantum Lakes Dr., #101, Boynton Beach, FL 33426. This limited liability company may, at its discretion, change the address of its principal place of business.

**ARTICLE IV**

The name and street address of the initial registered agent of this limited liability company is DAVID B. NORRIS, 712 U.S. Highway One, Suite 400, North Palm Beach, Florida 33408.

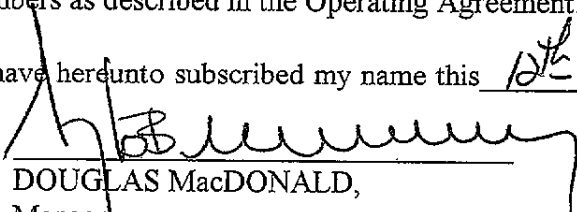
**ARTICLE V**

The management of this limited liability company shall be vested in a member or members (i.e. management committee as described in the Operating Agreement) and is, therefore, a member managed company.

**ARTICLE VI**

Additional members may be admitted to this limited liability company upon such terms and conditions as shall be established by the members as described in the Operating Agreement.

IN TESTIMONY WHEREOF, I have hereunto subscribed my name this 12<sup>th</sup> day of September 12, 2001.

  
DOUGLAS MacDONALD,  
Manager

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

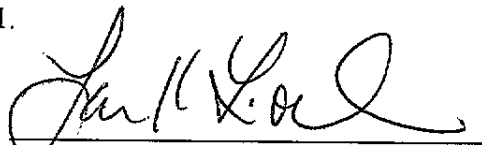
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FILED

STATE OF FLORIDA                     )  
   )  
COUNTY OF PALM BEACH             )

The foregoing instrument was acknowledged before me this 12<sup>th</sup> day of September, 2001,  
by DOUGLAS MacDONALD, who is personally known to me or who has produced Florida  
State Driver's License Number N/A as identification and who did ( ) or  
did not (X) take an oath.

Executed this 12<sup>th</sup> day of September, 2001.

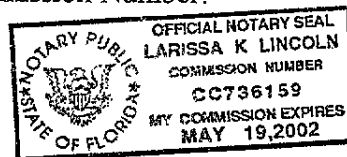


Signature of Notary

Printed Name: LARISSA K. LINCOLN

My Commission Expires:

My Commission Number:



APPROVED  
AND  
FILED

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CERTIFICATE DESIGNATING REGISTERED  
OFFICE FOR THE SERVICE OF PROCESS  
WITHIN THIS STATE, NAMING AGENT  
UPON WHOM PROCESS MAY BE SERVED**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

That **WALKABOUT GOLF & COUNTRY CLUB, LLC**, a Florida Limited liability company, with its registered office at 2500 Quantum Lakes Drive#101, Boynton Beach, Florida 33426, has named **DAVID B. NORRIS**, at 712 U.S. Highway One, North Palm Beach, FL 33408, as its initial registered agent to accept service of process within this State.

**ACKNOWLEDGMENT:**

Having been named registered agent to accept service of process for the above-stated limited liability company at the place designated in this Certificate, I hereby accept to act in such capacity and agree to comply with the applicable provisions of law.

By: \_\_\_\_\_

**DAVID B. NORRIS,**  
Registered Agent

STATE OF FLORIDA )

COUNTY OF PALM BEACH )

The foregoing instrument was acknowledged before me this 12<sup>th</sup> day of September, 2001 by **DAVID B. NORRIS**, who is personally known to me or who has produced Florida State Driver's License Number N/A as identification and who did ( ) or did not ( ) take an oath.

Executed this 12<sup>th</sup> day of September, 2001.

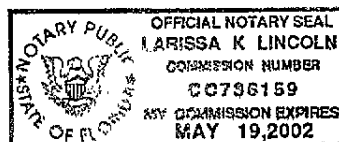
Signature of Notary

Printed Name: **LARISSA K. LINCOLN**

My Commission Expires:

My Commission Number:

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED