

Division of Corporations

FAX AUDIT H02000207748 3

Page 1 of 2

L02000026109

**Florida Department of State
Division of Corporations
Public Access System**

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H02000207748 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : LLOYD GRANET
Account Number : 074632001025
Phone : (561) 999-9300
Fax Number : (561) 999-9400

LIMITED LIABILITY COMPANY

Halcyon Golf L.L.C.

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

DIVISION OF CORPORATIONS

TALLAHASSEE, FLORIDA

RECEIVED

FILED

02 OCT -4 AM 7:49

02 OCT -3 AM 8:36

84
10/4

FAX AUDIT H02000207748 3

**ARTICLES OF ORGANIZATION
OF
Halcyon Golf L.L.C.**

**ARTICLE I
NAME**

The name of the Limited Liability Company is: Halcyon Golf L.L.C.

**ARTICLE II
ADDRESS**

The mailing address and street address of the principal office of the Limited Liability Company is: 95 Forest Avenue, Locust Valley, NY 11560.

**ARTICLE III
DURATION**

The period of duration for the Limited Liability Company shall be October 3, 2101 unless dissolved before such date in accordance with applicable laws or its Articles of Organization.

**ARTICLE IV
MANAGEMENT**

The Limited Liability Company is to be managed by managers and the names and addresses of such managers who are to serve as managers are:

Bernadette Castro

95 Forest Avenue, Locust Valley, NY 11560.

**ARTICLE V
ADMISSION OF ADDITIONAL MEMBERS**

A Person may be admitted as a member after the date of this Agreement upon the vote or written consent of at least a majority of the Membership Interest.

**ARTICLE VI
MEMBERS RIGHTS TO CONTINUE BUSINESS**

The bankruptcy, death, dissolution, liquidation, termination or adjudication of incompetency of a Member shall not cause the termination or dissolution of the Company and the business of the Company shall continue. Upon any such occurrence, the trustee, receiver, executor, administrator, committee, guardian, or conservator of such Member shall have all the rights of such Member for the purpose of settling or managing its estate or property, subject to satisfying conditions precedent

FAX AUDIT H02000207748 3

to the admission of such assignee as a substitute Member. The transfer by such trustee, receiver, executor, administrator, committee, guardian or conservator of any Membership Interest shall be subject to all of the restrictions, hereunder to which such transfer would have been subject if such transfer had been made by such bankrupt, deceased, dissolved, liquidated, terminated or incompetent Member. The foregoing shall apply to the extent permitted by applicable law.

Lloyd Granet, P.A.

By: 

Lloyd Granet, President

Signature of a member or an authorized representative of a member

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

Lloyd Granet

Typed or printed name of signee

100-6000
02 OCT -3 AM 8:36
TELEPHONE ROOM
FLORIDA

FAX AUDIT H02000207748 3

**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 DESIGNATED A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: Halcyon Golf L.L.C.
2. The name and the Florida street address of the registered agent is:

Lloyd Granet, P.A.
2295 NW Corporate Boulevard, Suite 135
Boca Raton, Florida 33431

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 property and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Lloyd Granet, P.A.

By: _____

Lloyd Granet

Filing Fee: \$35 for Designation of Registered Agent

FILED
02 OCT -3 AM 8:36
CLERK

F:\wpdocs\castro\halcyon golf llc\articles.wpd