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DIVIDION OF CORPORATIONS

DIVIDION OF CORPORATIONS

## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: U.S. Corporate Golf LLC  (Name of Limited Liability Company)  The enclosed Articles of Organization and fee(s) are submitted for filing.  Please return all correspondence concerning this matter to the following:  John C. Gallup
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
John C. Gallup (Name of Person)
(Name of Person)
U.S. Corporate Golf LLC (Firm/Company)
(Firm/Company)
1065 Raintree Lane (Address)
(Address)
Palm Beach Gardens, FL 33410
(City/State and Zip Code)
For further information concerning this matter, please call:
Tohn Gallup at (S61) 630 - 6192  (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

## ARTICLES OF ORGANIZATION **FOR** FLORIDA LIMITED LIABILITY COMPANY

F	ORGANIZATION OR JABILITY COMPANY  AT A COMPA
ARTICLE I - Name: The name of the Limited Liability Company is:	THE CORPORATION OF THE PARTY OF
U.S. Corporate Golf, LLC	Por
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
300 Village Square Crossing, Suite 214	1065 Raintree Lane
Palm Beach Gardens, FL 33410	Palm Beach Gardens, FL 33410
ARTICLE III - Registered Agent, Registered The name and the Florida street address of the re	
Sue C. Deakin	
Name	-
1065 Raintree Lane, Palm Bea Florida street address (P.O	

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..

City, State, and Zip

FLORIDA

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

The name and address of each Manager	The state of	
Title:	Name and Address:	_
"MGR" = Manager "MGRM" = Managing Member	A CONTRACTOR OF THE CONTRACTOR	
WORW - Managing Wember		۶
MGRM	John C. Gallup	
	1065 Raintree Lane	
	Palm Beach Gardens, FI 33410	
	<del></del>	_
		-
		-
		•
		_
(Use attachment if necessary)		
(Obe attachment if necessary)		
NOTE: An additional article must be	added if an effective date is requested.	
DECLIDED OF CHARLES		
REQUIRED SIGNATURE:		
Signature of a member or an au	ithorized representative of a member.	-
-	408(3), Florida Statutes, the execution	
of this document constitutes an a that the facts stated herein are true	ffirmation under the penalties of perjury	

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)

John C. Gailup

Typed or printed name of signee