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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

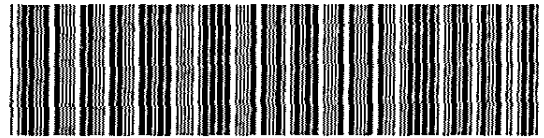
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**TRANSMITTAL LETTER**

TO: Registration Section  
Division of Corporations  
409 E. Gaines Street P.O. Box 6327  
Tallahassee, Florida 32399 Tallahassee, Florida 32314

SUBJECT: Shamrock Beach Resort, LLC

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michael J. VonPlinsky  
(Name of Person)

Shamrock Beach Resort, LLC.  
(Firm/Company)

4259 Bonita Beach Road  
(Address)

Bonita Springs, FL 34134  
(City/State and Zip Code)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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Fees are enclosed for the following:

- \$ 100.00 Filing Fee for Articles of Organization
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy

For further information concerning this matter, please call Mr. Michael VonPlinsky at (239) 390-3272. Thank you for your attention and help with this request.

Sincerely,



Michael VonPlinsky  
Managing Member  
Shamrock Beach Resort, LLC.

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

ARTICLE I - Name: Shamrock Beach Resort, LLC

ARTICLE II -

Principal Office Address: 4259 Bonita Beach Road, Bonita Springs, FL 34134

Mailing Address: (Same)

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

Name: Mr. Michael VonPlinsky  
4259 Bonita Beach Road  
Bonita Beach, FL 34134

Having been named as registered agent and to accept service of process for the above stated Limited Liability Company (LLC) 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.

Registered Agent's Signature: 

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	<u>Name and Address:</u>
MGRM	Curtis Hood 4259 Bonita Beach Road Bonita Beach, FL 34134

MGRM	Michael J. VonPlinsky 4259 Bonita Beach Road Bonita Beach, FL 34134
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MGRM	Gregory N. Rogers 10721 Eagle Ridge Road Louisville, KY 40223
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**REQUIRED SIGNATURE<sup>1</sup>:** 

<sup>1</sup> (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.)

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JUN 15 AM 11:29  
CLERK OF DADE  
COUNTY  
TREASURER  
FLORIDA