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(Re	equestor's Name)			
(Address)				
(Ad	ldress)			
(Cit	ty/State/Zip/Phone	e#)		
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
11/23	FL	ic		
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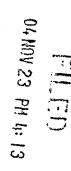
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MJH



LINDHORST & DREIDAME

A LEGAL PROFESSIONAL ASSOCIATION

312 WALNUT STREET, SUITE 2300

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TELEPHONE: (513) 421-6630

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(513) 345-5769 tmartin@lindhorstlaw.com

November 16, 2004

CHARLES G. SKIDMORE
MARGARET G. KUBICKI
MICHELLE L. CLEMONS
PRADIE OLL MAND
BRADIE O. MCPEEK
DAVID E. WILLIAMSON
WILLIAMSON
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JEFFREY A. WILLIS
LAURIE A. MCCLUSKEY
CHRISTOPHER H. HURLBURT

AMBROSE H. LINDHORST 1913-1997 ROBERT F DREIDAME 1914-1978 WILLIAM J. WALSH 1919-1996 LEO J. BRESLIN 1928-2000

(1) ALSO ADMITTED IN KENTUCKY
(2) ALSO ADMITTED IN FLORIDA

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

RE: Guinness Golf of Orlando, LLC

Dear Sir or Madam:

We enclose herewith for filing the Articles of Organization for Florida Limited Liability Company on behalf of Guinness Golf of Orlando, LLC along with a check in the amount of \$130.00 representing the filing fee for same. Once filed, please forward a Certificate of Status to me.

If you have any questions, please contact me.

Very truly yours,

LINDHORST & DREIDAME

Thomas E. Martin

TEM:pgg Enc.

TRANSMITTAL LETTER

Division of C			
SUBJECT:	GUINNESS GOLF (OF ORLANDO, LLC	
30D0BC1		d Liability Company)	
The enclosed Articles	of Organization and fee(s) are so	ubmitted for filing.	
Please return all corres	pondence concerning this matte	er to the following:	
Thomas	s E. Martin, Esq.		
	C	Name of Person)	
Lindhorst & Dreida			
	O	Firm/Company)	
312 Walnu	t Street, Suite 2300		
		(Address)	
Cinc	innati, OH 45202		
<u></u>	(City/	State and Zip Code)	
For further information	concerning this matter, please	call:	
		at (513 421-6630	
(Nam	e of Person)	(Area Code & Daytime Te	elephone Number)
Enclosed is a check f	or the following amount:		
☐ \$125.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Regi Divi: 409 l	EET ADDRESS: stration Section sion of Corporations E. Gaines Street hassee Florida 32390	MAILING A Registration S Division of Co P.O. Box 632'	ection orporations 7

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:				
GUINNESS GOLF OF ORLANDO, LLC				
ARTICLE II - Address: The mailing address and street address of the	e principal office of the Limited Liabi	ility Company is:		
Principal Office Address:	Mailing Address:			
4656 Millenia Plaza Way Orlando, FL 32839	4656 Millenia Plaza Way Orlando, FL 32839			
	010.00,72 0200			
ARTICLE III - Registered Agent, Registe	ered Office, & Registered Agent's Si	ignature:		
The name and the Florida street address of the	he registered agent are:			
Kevin Begley				
Na	ame			
4656 Millenia Plaza Way				
Florida street	t address (P.O. Box NOT acceptable)			
Orlando, FL 32839	FL			
City, Str	ste, and Zip			
Having been named as registered agent and liability company at the place designated registered agent and agree to act in this cape statutes relating to the proper and complete accept the obligations of my position as t	in this certificate, I hereby accept the accity. I further agree to comply with the performance of my duties, and I am firegistered agent as provided for in Cha	appointment as ne provisions of all amiliar with and		
	ent's Signature	O4 NOV 23 PII		

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGRM	Kevin Begley 4656 Millenia Plaza Way	
	Orlando, FL 32839	
	With the second	
(Use attachment if necessary)		
NOTE: An additional article must be	e added if an effective date is requested.	
REQUIRED SIGNATURE:		
Ke	Belen	
Signature of a member or an authorized representative of a member.		
(In accordance with sect of this document constitu that the facts stated he	ion 608.408(3), Florida Statutes, the execution utes an affirmation under the penalties of perjury rein are true.)	
Kevin Begley		
Typed or printed name of signee		

Fifing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

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