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(Re	equestor's Name)	
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(Cit	ty/State/Zip/Phone #	<del>(</del> f)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	·)
(Do	cument Number)	
Certified Copies	_ Certificates o	f Status
Special Instructions to	Filing Officer:	
		1/24
	Office Use Only	



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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY **ARTICLE I - Name:** The name of the Limited Liability Company is: GOLF ACADEMY OF CENTRAL FLORIDA, LLC **ARTICLE II - Address:** The mailing address and street address of the principal office of the Limited Liability Company is: **Principal Office Address: Mailing Address:** 1763 US HWY 27 S 1763 US HWY 27 S SEBRING, FL 33870 SEBRING, FL 33870 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are: KEITH FOSTER -Name 1763 US HWY 27 S Florida street address (P.O. Box NOT acceptable) SEBRING, FL 33870 City, State, and Zip 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 appointmental 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

(CONTINUED)

Registered Agent's Signature

accept the obligations of my position as registered agent as provided for in Chapter 608, F.

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

11116.	Name and Address.	
"MGR" = Manager		
"MGRM" = Managing Member		
MGRM	KEITH FOSTER	
	1763 US HWY 27 S	
	SEBRING, FL 33870	
MGRM	FRANCIS FASSINO	
	1763 US HWY 27 S	
	SEBRING, FL 33870	
	<del> </del>	
(Use attachment if necessary)		
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NOTE: An additional article m	nust be added if an effective date is requested. LAHASSEE	
	AS S	
REQUIRED SIGNATURE:	HE A	-
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9/13	Signatur For 3	r n
Signature of a me	ember or an authorized representative of a member	
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(In accordance wi	th section 608.408(3), Florida Statutes, the execution	
	constitutes an armination under the penatics of perjury	
unat the facts sta	ated herein are true.)	

Filing 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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