

L05000056484

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.

(((H05000140766 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 : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305)634-3694
Fax Number : (305)633-9696

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 JUN -7 AM 11:56

FILED

WR 06/08/05

RECEIVED
DIVISION OF CORPORATIONS
05 JUN -7 AM 8:17

LIMITED LIABILITY COMPANY

broward ski & wakeboard school, llc

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

3p

H05000140766

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

BROWARD SKI & WAKEBOARD SCHOOL, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

13771 BLUESTONE LAKE COURT
DAVIE, FLORIDA 33325

Mailing Address:

13771 BLUESTONE LAKE COURT
DAVIE, FLORIDA 33325

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

The name and the Florida street address of the registered agent are:

MICHAEL R. TOLZMANN

Name

13771 BLUESTONE LAKE COURT

Florida street address (P.O. Box NOT acceptable)

DAVIE, FLORIDA 33325

FL

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 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, F.S.

Michael R. Tolzmann
Registered Agent's Signature

(CONTINUED)

Page 1 of 2

H05000140766

FILED
05 JUN -7 AM 11:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TOTAL P.03

H05000140766

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:

MANAGER

MICHAEL R. TOLZMANN

13771 BLUESTONE LAKE COURT

DAVIE, FLORIDA 33325

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Michael R. Tolzmann
Signature of a member or an authorized representative of a member.

(In accordance with section 606.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

MICHAEL R. TOLZMANN

Typed or printed name of signer

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)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 JUN -7 AM 11:56

FILED

H05000140766