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Division of Corporations Public Access System

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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

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LIMITED LIABILITY COMPANY

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ARTICLES OF ORGANIZATION

FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name of Limited Liability Company: KISSIMMEE RC RACEWAY,

ARTICLE II - Mailing Address & Street Address of Limited Liability Company:

Address: 5981 STAR GRASS LANE

City, State & Zip: NAPLES, FL 34116

ARTICLE III - Registered Agents Name, Office Address, & Registered Agents Signature:

KEVIN HUTCHINSON Name

5981 STAR GRASS LANE Address (P.O. Box NOT Acceptable)

NAPLES, FL 34116 City, State, 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..

Registered Agent's Signature

Date 07/06/2005

Article IV - Management (Check box if applicable.)
The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company. Specify name & address(es).

1.

2.

Signature of a member or an authorized representative of a member. In accordance with section 608.408 (3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that

KEVIN HUTCHINSON

Typed or printed name of member

the facts stated herein are true.