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Account Name : SHUFFIELD LOWMAN

Account Number : I20030000118

Phone : (407)581-9800 Fax Number : (407)581-9801

### FLORIDA/FOREIGN LIMITED LIABILITY CO.

### 5th HOLE INVESTMENTS, LLC

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# ARTICLES OF ORGANIZATION OF 5th HOLE INVESTMENTS LLC

5th HOLE INVESTMENTS, LLC A Florida Limited Liability Company

Effective Date 5 14 07

#### ARTICLE I NAME

The name of this limited liability company is 5<sup>th</sup> HOLE INVESTMENTS, LLC, referred to in these Articles of Organization as the "Company."

### ARTICLE II MAILING AND STREET ADDRESS

The mailing address and street address of the principal office of the Company are as follows:

1355 Errol Parkway Apopka, FL 32712

## ARTICLE III COMMENCEMENT OF COMPANY'S EXISTENCE

In accordance with Section 608.409(1), Florida Statutes, the Company's existence shall be deemed to have commenced on March 14, 2007, or if later, such date as if five (5) business days prior to the date on which these Articles of Organization are filed by the Florida Department of State.

#### ARTICLE IV REGISTERED AGENT

The address of the initial Registered Office and the Registered Agent at such address are as follows:

William R. Lowman, Jr., Esq. Shuffield, Lowman & Wilson, P.A. 1000 Legion Place, Suite 1700 Orlando, FL 32801

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### ARTICLE V MANAGEMENT

The Company is to be a manager-managed company. A manager may receive compensation for his or its services. The name and address of the initial manager shall be determined at a later date.

#### ARTICLE VI APPLICABLE LAW

The Company is created pursuant to Chapter 608, Florida Statutes, and shall be governed by the laws of the State of Florida.

William R. Lowman, Jr., as Authorized Representative

### ACCEPTANCE OF DESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of Section 608.415, Florida Statutes, the undersigned submits the following statement of acceptance of his designation as Registered Agent for the Company:

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 ast Registered Agent as provided for in Chapter 608 of the Florida Statutes.

William R. Lowman, Jr.

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SECRETARY OF STATE TALLAHASSEE, PLORIDA