

**W07000038547**Florida Department of State  
Division of Corporations  
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## To:

Division of Corporations  
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Account Name : FASTKIT CORPORATE OUTFITS  
Account Number : 071001002335  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**FLORIDA/FOREIGN LIMITED LIABILITY CO.****FINISH LINE THOROUGHBREDS., LLC.**

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**W07-38547**  
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**ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I -- Name:**

The name of the Limited Liability Company is:

FINISH LINE THOROUGHBREDS, LLC.

**ARTICLE II -- Address:**

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

Principle Office Address:

Mailing Address:

6735 NW 60<sup>TH</sup> ST

6735 NW 60<sup>TH</sup> ST

OCALA, FL 34482

OCALA, FL 34482

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

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

RHODA PILCHER

Name

6735 NW 60<sup>TH</sup> ST

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

OCALA, FL 34482

City, State, and Zip

*Having been named as registered agent and to accept service of process for 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, Florida Statutes.*

*Rhoda E. Pilcher*

Registered Agent's Signature

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**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

RHODA PILCHER

6735 NW 60<sup>TH</sup> ST

OCALA, FL 34482

MEMBER

MARK PILCHER


6735 NW 60<sup>TH</sup> ST

Ocala, FL 34482

(Use attachment if necessary)

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

**REQUIRED SIGNATURE:**

✓   
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 penalties of perjury that the facts stated herein are true.)

RHODA PILCHER  
Typed or printed name of signer

2007 APR 10 AM 8:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA