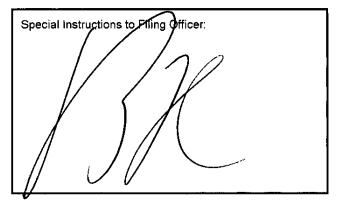
L07000071527

(Requestor's Name)		
(Address)		
(Addre	ess)	
(City/S	itate/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificates	of Status



Office Use Only



100102089561

7 JUL -6 PM 2: L

SEIVED

O7 JUL -6 AM 9: 17
ECRETARY OF STATE



ACCOUNT NO. : 072100000032 REFERENCE: 985140 4350033 AUTHORIZATION : COST LIMIT : ORDER DATE : July 6, 2007 ORDER TIME : 12:41 PM ORDER NO. : 985140-005 CUSTOMER NO: 4350033 DOMESTIC FILING NAME: FGT, LLC EFFECTIVE DATE: ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING CONTACT PERSON: Debbie Skipper - EXT. 2948 EXAMINER'S INITIALS:



RECEIVED

FLORIDA DEPARTMENT OF STATE & Division of Corporations

July 6, 2007

DEBBIE SKIPPER CSC TALLAHASSEE, FL

SUBJECT: FGT, LLC

Ref. Number: W07000032065



We have received your document for FGT, LLC and the authorization to debit your account in the amount of \$125.00. However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr Document Specialist

Letter Number: 407A00043451

ARTICLES OF ORGANIZATION

SECRETARY OF M.S.

OF

FGTA, LLC

The undersigned, being the sole member of FGTA, LLC (the "Company"), for the purposes of organizing a limited liability company pursuant to the Florida Limited Liability Company Act, delivers these Articles of Organization to the Florida Department of State for filing, and states as follows:

- 1. Name. The name of the Company is "FGTA, LLC".
- 2. <u>Principal Place of Business</u>. The mailing address and street address of the principal office of the Company is 100 International Golf Drive, Daytona Beach, Florida 32124.
- 3. Registered Office and Agent. The name and street address of the Company's initial registered agent for service of process in Florida are Corporation Service Company, 1201 Hays Street, Tallahassee, Florida 32301.
 - 4. **Management.** The Company shall be member-managed.
- 5. <u>Members</u>. The Company's sole member shall be the Ladies Professional Golf Association, an Ohio nonprofit corporation (the "Member").
- 6. Purposes. The Company is organized and shall be operated for the support and benefit the Member and the Member's exempt functions and purposes. Without limiting the generality of the foregoing, the Company is organized and shall be operated to establish and maintain high standards in the promotion, development and conduct of women's professional golf activities; to provide vocational opportunities in teaching, tournament play, merchandise and golf promotion for women golf professionals; to cooperate with organizations engaged in golf promotion whose objectives are compatible with those of the Member; and to protect and further the mutual interests of the Company and the Member; and thereby to promote world-wide interest in the game of golf.

In witness whereof, the Member causes these Articles of Organization to be executed by an authorized officer, as of this 6th day of July, 2007, such officer's signature constituting an affirmation under penalties of perjury that the facts stated herein are true and correct.

SOLE MEMBER:

Ladies Professional Golf Association

Zilba Sullowy

Name: <u>Libba Galloway</u> Its: Deputy Commissioner

CERTIFICATE OF REGISTERED AGENT

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 Section 608 of the Florida Limited Liability Company Act.

REGISTERED AGENT TO FGTA, LLC:

Corporation Service Company A

s: Sarah K. Drake

as its agent