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07 DEC -3 AM II: 37
SECRETARY OF STATE
SALLAHASSEE FLORID.

. COVER LETTER

TO: Registration Se Division of Co				
_{SUBJECT:} Saraso	ta Putting Greens LLC	C .		
		d Liability Compa	ny)	······································
The enclosed Articles o	f Organization and fee(s) are so	ubmitted for filing	J.	
Please return all corresp	ondence concerning this matte	r to the following:	:	
Dragan Ko	stic			
	0	Name of Person)		
Sarasota P	utting Greens LLC.			
	(Firm/Company)		
2437 canr	nolot blvd.			
		(Address)		
Port Charl	otte, FL. 33948			
-	(City	State and Zip Code)	
For further information	concerning this matter, please	call:		
Dragan Kostic		at (941	321-404	4
(Name	of Person)	(Area Code & Daytime Telephone Number)		
Enclosed is a check for	or the following amount:			
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	& S155.00 Filing Fee & Certified Copy (additional copy is enclosed)		\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		ns

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Sarasota Puttin							
(Must end with the v	vords "Limited Liability Company	"Limited Company" or their abbreviation "LLC,"	or "L.C.,")				
ARTICLE II -	Address:						
The mailing ad-	dress and street address of	f the principal office of the Limited Lia	ability Company is:				
Principal Office Address:		Mailing Address:					
265 Seaboard Ave	e. N	2437 cannolot blvd.					
units 59-60		Port Charlotte, FL. 33948					
Venice, FL. 3428	5						
Ť	n an active Florida registration.) the Florida street address of Dragan Kostic	of the registered agent are:	O7 DEC SECRE				
Name		Name	ASP 3				
	2437 cannolot blvd.		部 平 門				
	 	treet address (P.O. Box NOT acceptable)	YOF S				
	 	treet address (P.O. Box <u>NOT</u> acceptable)	AMII: 37 SEE FLORIC				
	Florida si Port Charlotte,		AMII: 37 SEE FLORIDA				

istered agent and agree to act in this capacity. I further agree to comply with the provisions of tatutes relating to the proper and complete performance of my duties, and I am familiar with an accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

Dajan Jasks
Registered Agent's Signature (REQUIRED)

(CONTINUED) Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

"MGR" = Manager "MGRM" = Managing Member MGR Dragan Kostic 2437 cannolot blvd.		-	
MGR Dragan Kostic 2437 cannolot blvd.		-	
2437 cannolot blvd.		_	
2437 cannolot blvd.			
		_	
Port Charlotte, FL. 33948			
		-	
		_	
		-	
	····	-	
		_	
		_	
		_	
		_	
(Use attachment if management)			
(Use attachment if necessary)			
RTICLE V: Effective date, if other than the date of filing:	. (OPTIC)NAL	3
f an effective date is listed, the date must be specific and cannot be more than five	business	days	prior
or 90 days after the date of filing.)		•	•
REQUIRED SIGNATURE:	-4	_	
0 101	ALIS	071	
Iraian lost	L AFE	E	0 0
Signature of a member or an authorized representative of a memb	er. ASS	X	
(In accordance with section 608.408(3), Florida Statutes, the execution	7887	(1)	là - 1.2 Namel
of this document constitutes an affirmation under the penalties of perju	ırv	呈	1
that the facts stated herein are true.)		AH II: 37	Lingston
Dragan Kostic	_ 22	37	
Typed or printed name of signee	>	-	

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)