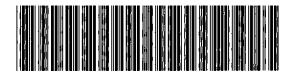
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B. KOHR
JUL 2 1 2008
EXAMINER



COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: TALLAHASSEE THRASHERS BASEBALL CLUB LLC
(Name of Limited Liability Company)
The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: RON BENFIELD
Please return all correspondence concerning this matter to the following:
RON BENFIELD
(Name of Person)
(Firm/Company)
58 SIOUX CIRCLE
(Address)
HAVANA, FL 32333
(City/State and Zip Code)
For further information concerning this matter, please call:
RON BENFIELD 850 \ 539-5171
(Name of Person) at (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\sum
Mailing Address Street/Courier Address

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

ARTICLE I - Name: The name of the Limited Liability Company is: TALLAHASSEE THRASHERS BASEBALL CLUB LLC (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.") ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: Mailing Address:

3135 MCCORD BLVD

TALLAHASSEE, FLORIDA 32303

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

3135 MCCORD BLVD

TALLAHASSEE, FLORIDA 32303

RON BEN	NFIELD	
	Name	
58 SIOUX	X CIRCLE	
	Florida street add	iress (P.O. Box NOT acceptable
HAVANA	, FL 32333	FL
	City, State, a	ınd 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 (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:

MGRM	FRANK KEEL	
	3135 MCCORD BLVD	
	TALLAHASSEE, FLORIDA 32303	
MGRM	GARY GENTRY	
	3135 MCCORD BLVD	
	TALLAHASSEE, FLORIDA 32303	
MGRM	JOE CALABRESE	
	3135 MCCORD BLVD	
	TALLAHASSEE, FLORIDA 32303	
MGRM	LASHELLE KEEL	
	3135 MCCORD BLVD	
	TALLAHASSEE, FLORIDA 32303	
(Use attachment if necessary)		
F.V. Effective data if other th	an the date of filing: (OPTIO	

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

RON BENFIELD

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)