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TALLAHASSEE FIRE

D. BRUCE

SEP 05 2008

EXAMINER

COVER LETTER

Registration Section

Division of Co	porations			
SUBJECT: EAST	FLORIDA TURF, I	LLC		
	(Name of Limite	ed Liability Company)		
The enclosed Articles of	Organization and fee(s) are	submitted for filing.		
Please return all correspo	ondence concerning this matt	er to the following:		
CHARLES	H. COWART			
		(Name of Person)		-
		_		_
		(Firm/Company)		-
7710 C.R.	305			_
		(Address)	7117 7.E.C. 8.E.C.	5 · · · ·
BUNNELL		······································	AF. F	
	(Ciŋ	y/State and Zip Code)	(0)	4. 84 JAN 3 34 2 SECTION SECTI
For further information concerning this matter, please call:			ETLO:	1617.4810 1617.4810
JOSEPH G. MA	AVO CPA	561 \ 531-0988		Mgarine Mgarine
	of Person)	at () O I) O I O O O O		
Enclosed is a check for	r the following amount:			,
	\$130.00 Filing Fee &	□\$155.00 Filing Fee & □	\$160.00 Filing Fee,	
	Certificate of Status		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 Cir Tallahassee, FL 32301	rcle	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

(Must end with the words "Lin	nited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address	of the principal office of the Limited Liability Compar
Principal Office Address:	Mailing Address:
7710 C.R. 305	7710 C.R. 305
BUNNELL, FL 32110	BUNNELL, FL 32110
ARTICLE III - Registered Agent, Re	gistered Office, & Registered Agent's Signature:
(The Limited Liability Company cannot serve as its business entity with an active Florida registration.)	own Registered Agent. You must designate an individual or another
(The Limited Liability Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street address	own Registered Agent. You must designate an individual or another
(The Limited Liability Company cannot serve as its business entity with an active Florida registration.)	own Registered Agent. You must designate an individual or another
(The Limited Liability Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street address	own Registered Agent. You must designate an individual or another soft the registered agent are: AYO, CPA Name
(The Limited Liability Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street address JOSEPH G. M. 7710 C.R. 305	own Registered Agent. You must designate an individual or another soft the registered agent are: AYO, CPA Name
(The Limited Liability Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street address JOSEPH G. M. 7710 C.R. 305	own Registered Agent. You must designate an individual or another s of the registered agent are: AYO, CPA Name Street address (P.O. Box NOT acceptable)

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

Title: "MGR" = Mau "MGRM" = M	nager Ianaging Member	Name and Address:	
MGRM		CHARLES H. COWART	
	' ' ' ' ' ' ' ' ' ' ' '	7710 C.R. 305	
		BUNNELL, FL 32110	
			_
			_
			
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	ent if necessary)	A A CCIT	
LE V: Effecti ffective date is days after the	ve date, if other than the listed, the date must be date of filing.)	e date of filing: (OPT be specific and cannot be more than five busine	TONA
LE V: Effecti ffective date is days after the	ve date, if other than the listed, the date must b	e date of filing: (OPI be specific and cannot be more than five busine	ION.
LE V: Effecti fective date is days after the	ve date, if other than the listed, the date must be date of filing.) SIGNATURE:	e date of filing: (OPI se specific and cannot be more than five busine A bownth a second control of a member of a member of a member of a member of a member.	TON. ss da
LE V: Effecti fective date is days after the	ve date, if other than the listed, the date must be date of filing.) SIGNATURE: Signature of a member of this document constant that the facts stated	er or an authorized representative of a member. ection 608.408(3), Florida Statutes, the execution cititutes an affirmation under the penalties of perjury therein are true.	ION Ses da
LE V: Effecti fective date is days after the	ve date, if other than the listed, the date must be date of filing.) SIGNATURE: Signature of a member of this document constant that the facts stated	er or an authorized representative of a member.	ION See da