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| Special Instructions to Filing Officer: |  |  |  |  |
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Office Use Only



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Effective Date 02/24/09

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SECRETARY OF STATE
SECRETARY OF STATE

J. BRYAN

MAR - 3 2009

**EXAMINER** 

## COVER LETTER

| Division of Co                  |   |   |  |
|---------------------------------|---|---|--|
| subject: Bron                   | 50N SpeedWC<br>(Name of Limi  | ay f Motor Sported Liability Company)   | ts Park LLC  |
| The enclosed Articles of        | Organization and fee(s) are   | submitted for filing.   |  |
| Please return all correspondent | ondence concerning this mat   | tter to the following:  |  |
| Tonya.                          | A. Parker   | (Name of Person)  |  |
| Bransons                        | speedway & Mo   | tor Sports Park L<br>(Firm/Company)   | -LC  |
| P.O. Box                        | x 1025  |   |  |
|                                 |   | (Address)   | FE 3 T   |
| Bronso                          | n FL  | 32621   | 発えて  |
|                                 | (Ci   | ty/State and Zip Code)  | SEE SEE  |
| For further information of      | concerning this matter, pleas   | e call:   | PH 2: 18  Y OF STATE REF. FLORIT   |
| Sarah Hicks                     | of Person)  | at (352 ) 486-6<br>(Area Code & Daytime Tele  | 1272 P   |
| Enclosed is a check for         | r 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,<br>Certificate of Status &<br>Certified Copy<br>(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 C Tallahassee, FL 32301 |  |

| PR & T   |
|--|
| ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY   |
| ARTICLE I - Name: The name of the Limited Liability Company is:  |
| Brons on Speedway & Motor Sports Park 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:   |
| 9950 NE SR 24 P.O. Box 1025 Bronson Bronson FL 32621   |
| 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:  Effective Date $02/26/06$  |
| Sarah Hicks<br>Name  |
| Louis Marsh burn Dr. Florida street address (P.O. Box NOT acceptable)  |
| Bronson FL 32621 City, State, and 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 |

Registered Agent's Signature (REQUIRED)

accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

(CONTINUED)
Page 1 of 2

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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:

| <u>Title:</u> "MGR" = Manager "MGRM" = Managing Member   | Name and Address:                               |  |  |  |
|--|---|--|--|--|
| MGRM   | Tonya A. Parker P.O. Box 1025 Bronson FL 32621  |  |  |  |
| MGRM   | Robert A. Parker P.O. Box 1025 Bronson & 32621  |  |  |  |
|  |   |  |  |  |
| (Use attachment if necessary)  ARTICLE V: Effective date, if other than the (If an effective date is listed, the date must be to or 90 days after the date of filing.)                     | e date of filing: 2/26/09                       |  |  |  |
| REQUIRED SIGNATURE:  |   |  |  |  |
| Robert   | A A. Rulu                                       |  |  |  |
| Signature of a memb  | er 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.) |   |  |  |  |
| Rober  | <u>,                                     </u>   |  |  |  |
| Filing Fees:   | ··  |  |  |  |

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.90 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)