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(Requestor's Name)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
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Special Instructions to Filing Officer:				
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2009 JUL -6 PH 1: 53
SECRETARY OF STATE

T. CLINE

JUL -7 2009

EXAMINER

COVER LETTER

TO:	Registration Division of (Section Corporations		
SUBJE	Clutch Motosports, LLC.			
		Name of Lin	nited Liability Company	
The en	closed Articles	of Organization and fee(s) ar	re submitted for filling.	
Please	return all corre	spondence concerning this m	atter to the following:	
		Nic	holas T. Bakios III	
		•	Name of Person	
	ch Motosports, LLC.			
			Firm/Company	
	······································	hree Iron Drive #2201		
			Address	
			laples, FL 34110	
			sxr1000@yahoo.com	
-		E-mail address: (to be used	I for future annual report notification)	
For fur	ther information	n concerning this matter, plea	* * * * * * * * * * * * * * * * * * *	
		as T. Bakios III	at (724) 612-7723 SA Area Code & Daytime Telephone Number	
	Nam	e of Person	Area Code & Daytime Telephone Number	
Enclos	ed is a check	for the following amount:		
]\$ 125.0	00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 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	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
Clutch Motospo	orts IIC
(Must end with the words "Limited Liabili	
ARTICLE II - Address:	
The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
Clutch Motosports, LLC.	Clutch Motosports, LLC.
5908 Three Iron Drive #2201	PO Box 111437
Naples, FL 34110	Napies, FL 34108
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	
The name and the Florida street address of the re	Lu -
Nicholas T. E	Bakios III
Name	Drive #2201
5908 Three Iron	Drive #2201 53
Florida street address (P.O.	Box NOT acceptable)
Naples, FL 34110	FL
City, State, an	d 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: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGRM Nicholas Bakios III 5908 Three Iron Drive #2201 Naples FL 34110 MGRM Kathryn R. Hubert 5425 Worthington Lane #101 Naples, FL 34110 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be more than five business to or 90 days after the date of filing.) **REQUIRED SIGNATURE:** Signature of a member of 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.) Nicholas T. Bakios III

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)

Typed or printed name of signee