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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : GREENSPOON MARDER, P.A.

Account Number: 076064003722 Phone : (888)491-1120

Fax Number : (954)343-6962

FLORIDA/FOREIGN LIMITED LIABILITY CO.

ONLY TEES AND GREENS, LLC

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$160.00

C. LEWIS SEP 2 4 2009 **EXAMINER**

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ARTICLES OF ORGANIZATION OF ONLY TEES AND GREENS, LLC

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SECRETARY OF STATE TALLAHASSEE. FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is ONLY TEES AND GREENS, LLC.

ARTICLE II - Duration:

The period of duration for the Limited Liability Company shall begin with the filing of these Articles with the Florida Department of State, and shall exist perpetually, unless sooner dissolved in accordance with the Operating Agreement of the Limited Liability Company or Florida law.

ARTICLE III - Address:

The mailing address and street address of the principal office of the Limited Liability Company is 8686 SW 110th Street, Ocala, Florida 34481.

ARTICLE IV - Registered Agent:

The name and address of the initial registered agent for this Limited Liability Company is Gene K. Glasser, Esq. 100 W. Cypress Creek Road, Suite 700, Fort Lauderdale, Florida 33309.

ARTICLE V - Management:

The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of the initial manager(s) who is/are to serve as manager(s) is/are:

Carol Olson 8686 SW 110th Street Ocala, Florida 34481

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Whereof, the undersigned Member has executed these Articles the 2 day of September, 2009.

Gene K. Glasser

Authorized Representative of the Member

CERTIFICATE OF DESIGNATION OF

REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

ONLY TEES AND GREENS, LLC

2. The name and address of the registered agent and office is:

Gene K. Glasser, Esq.

180 W. Cypress Creek-Road, Suite 700. Fort Lauderdale, Florida 33309

By:_

Gene K. Glasser, Registered Agent

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.

Gene K. Glasser, Esq.

(Signature)

Septembel >2009

Date)

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FILEU 109 SEP 23 M 8: 18 SECRETARY OF STATE