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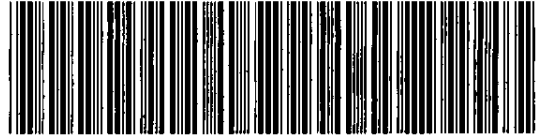
(Business Entity Name)

(Document Number)

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10 JAN - 7 PM 2:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D. BRUCE

JAN - 8 2010

EXAMINER



THE METROPOLITAN  
320 NORTH FIRST STREET  
SUITE 613  
JACKSONVILLE BEACH, FL 32250  
TEL: 904.247.1755  
FAX: 904.247.1669

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Atlantic Beach Performance, LLC

The enclosed Articles of Organization and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Bryan C. Goode III  
DiRito & Goode, P.L.  
320 1st Street North, Suite 613  
Jacksonville Beach, Florida 32250  
E-mail address (to be used for future annual report notification): mark@integrativegolffitness.com

For further information concerning this matter, please call:

Bryan C. Goode III at (904) 247.1755

Enclosed is a check for the following amount: \$155.00 Filing Fee and Certified Copy (additional copy is enclosed)

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**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  
OF  
ATLANTIC BEACH PERFORMANCE, LLC**

**ARTICLE I - NAME**

The name of the limited liability company is Atlantic Beach Performance, LLC, ("company").

**ARTICLE II - ADDRESS**

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

725 Atlantic Boulevard, Unit 19  
Atlantic Beach, Florida 32233

Mailing Address:

725 Atlantic Boulevard, Unit 19  
Atlantic Beach, Florida 32233

**ARTICLE III - REGISTERED AGENT,  
REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE**

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

Mark Avens  
725 Atlantic Boulevard, Unit 19  
Atlantic Beach, Florida 32233

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*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..*

  
\_\_\_\_\_  
Mark Avens

**ARTICLE IV - MANAGERS OR MANAGING MEMBERS**

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGMR" = Managing Member

Name and Address:

MGMR

Mark Avens

725 Atlantic Boulevard, Unit 19

Atlantic Beach, Florida 32233

## ARTICLE V - OTHER MATTERS

All members shall have preemptive rights with respect to any units by the company subsequent to the date on which such member purchased his or her units. The preemptive right of each individual member shall entitle such member to purchase a percentage of the units to be issued by the company such that his or her proportionate ownership interest in the company will remain the same.

Except as otherwise expressly provided by the Act, no member, manager, officer, agent or employee of the Company shall be personally liable for the debts, obligations or liabilities of the Company, whether arising in contract, tort or otherwise, or for the acts or omissions of any other member, manager, officer, agent or employee of the Company.

### 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.)

Mark Avens

Typed or printed name of signee

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TALLAHASSEE, FLORIDA