Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

Electronic Filing Cover Sheet

(((H100001427943)))



Note: DO NOT has the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet,

To:

Division of Corporations

Fax Number

: (850)617-6383

from:

Account Name : RUDEN, MCCLOSKY, SMITH, SCHUSTER & RUSSELL,

Account Number : 076077000521

; (954)527-2428

Phone fax Number

: (954)333-4001

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Rmail Address:

· 177

## FLORIDA LIMITED LIABILITY CO. Twineagels Club Managing Member, LLC

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

J. BRYAN

JUN 18 2010

EXAMINER

4.

## ARTICLES OF ORGANIZATION OF TWINEAGLES CLUB MANAGING MEMBER, LLC a florida Limited Liability Company

The undersigned, pursuant to the provisions of Chapter 608 of the Elbrida Statutes, for the purpose of forming a Limited Liability Company under the laws of the State of Florida do set forth the following:

- I. NAME. The name of the Limited Liability Company is TWINEAGLES CLUB MANAGING MEMBER, LLC (the "Company").
- 2. MAILING AND STREET ADDRESS OF PRINCIPAL OFFICE. The mailing and street address of the principal office of the Company is: 3185 Horseshoe Drive South, Naples, Florida 34104.
- 3. <u>REGISTERED AGENT</u>. The name and address of the initial registered agent in the State of Florida, whose Consent to Appointment as Registered Agent accompanies these Articles of Organization is: Anthony P. Solomon, 3185 Horseshoe Drive South, Naples, Florida 34104.
- 4. <u>MANAGEMENT</u>. The business of the limited liability company shall be managed by one or more members and is, therefore, a member-managed company. The initial sole member shall be: Anthony P. Solomon, 3185 Horseshoe Drive South, Naples, Florida 34 104.

The undersigned has executed these Articles of Organization on the 1/2 day of June, 2010.

Anthony P. Solomon, sole Member

FILED 10 JUN 17 AM 8: 02 SECRETARY OF STATE SECRETARY OF STATE ALL AHASSEE, FLORID

RM 7453573 1

## CERTIFICATION OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, 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 hability company is: Twingagles Club Managing

Member, LLC.

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

Anthony P Solomon 3185 Horseshoe Drive South Naples, Florida 34104

Having been named as registered agent and to accept service of process for the above stated limited limitely company at the place designated in this certificate. I hereby accept the appointment as registered agent and agree to act in its 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.

Anthony P. Solomon, Registered Agent

Date: / Line 17 2010

10 JUN 17 AM 8: 02
SECRETARY OF STATE
SECRETARY OF STATE

RM 7453573-1