

L10 000073525

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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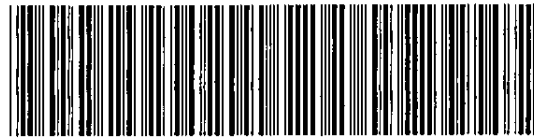
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JUL 13 2010

EXAMINER



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10 JUL 13 AM 10:43

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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10 JUL 13 PM 2:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 444869 9666A

AUTHORIZATION

COST LIMIT \$ 125.00

ORDER DATE : July 13, 2010

ORDER TIME : 9:49 AM

ORDER NO. : 444869-005

CUSTOMER NO: 9666A

DOMESTIC FILING

NAME: MARION GAMING MANAGEMENT, LLC

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Kimberly Moret - EXT. 2949

EXAMINER'S INITIALS: _____

**ARTICLES OF ORGANIZATION
FOR
MARION GAMING MANAGEMENT, LLC
A FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I.
NAME**

The name of the Limited Liability Company is "*Marion Gaming Management, LLC*", a Florida limited liability company (the "*Company*").

**ARTICLE II.
ADDRESS**

The mailing address and street address of the principal office of the Company is 125 NE 1st Avenue, Suite 1, Ocala, FL 34470.

**ARTICLE III.
DURATION**

The period of duration for the Company shall be perpetual unless the Company is earlier dissolved in accordance with either the provisions of the *Florida Limited Liability Company Act*, Sections 608.401 through 608.514 of the *Florida Statutes Annotated* (the "*Act*") or the Company's Operating Agreement among the members (the "*Operating Agreement*").

**ARTICLE IV.
MANAGEMENT**

The Limited Liability Company is to be managed by a manager or managers.

**ARTICLE V.
PURPOSE**

The purpose for which the Company is being organized is to own, lease, manage, and operate pari-mutuel gaming and public events facilities, and to engage in businesses related to the ownership, management and operation of pari-mutuel, gaming and public facilities, and otherwise to transact any other lawful business approved by the members of the Company and for which a limited liability company may be formed under the laws of the State of Florida.

**ARTICLE VI.
MEMBERS' RIGHTS TO CONTINUE BUSINESS**

The right of the remaining members of the Company to continue the business on the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the Company shall be upon the consent of all of the remaining members in accordance with the terms and conditions of the Operating Agreement to continue the business of the Company, provided that there is at least one (1) remaining member.

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TALLAHASSEE, FLORIDA


**ARTICLES OF ORGANIZATION
FOR
MARION GAMING MANAGEMENT, LLC
A FLORIDA LIMITED LIABILITY COMPANY**

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**ARTICLE VII.
AMENDMENTS**

The Company reserves the right to amend, alter, change or repeal any provision contained in these Articles of Organization, in the manner now or hereafter prescribed by the Act.

IN WITNESS WHEREOF, the undersigned, being a member of the Company, has hereunto set his hand this 9th day of July, 2010.



STEVEN H. GRAY

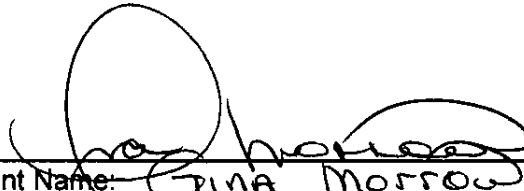
**STATE OF FLORIDA
COUNTY OF MARION**

The foregoing ARTICLES OF ORGANIZATION were acknowledged before me by STEVEN H. GRAY, as a member of the above named limited liability company, who is:

☒ personally known by me; OR
☐ produced a driver's license as identification.

Dated: this 9th day of July, 2010.

GINA MORROW
Notary Public, State of Florida
My comm. expires April 9, 2012
Comm. No. DD 777047



Print Name: Gina Morrow
Notary Public, State of Florida
Commission number _____
Commission expires _____

**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: *Marion Gaming Management, LLC.*
2. The name and address of the registered agent, and office address of the company is:

Steven H. Gray
125 NE 1st Avenue, Suite 1
Ocala, FL 34470

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.


STEVEN H. GRAY

Date: July 9th, 2010

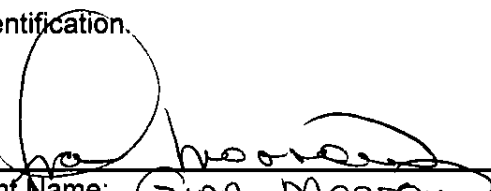
**STATE OF FLORIDA
COUNTY OF MARION**

The foregoing CERTIFICATE OF DESIGNATION of REGISTERED AGENT/REGISTERED OFFICE was acknowledged before me by STEVEN H. GRAY, as Registered Agent of the above named limited liability company, who is:

☒ personally known by me; OR
☐ produced a driver's license as identification.

Dated: this 9th day of July, 2010.

GINA MORROW
Notary Public, State of Florida
My comm. expires April 9, 2012
Comm. No. DD 777047


Print Name: Gina Morrow
Notary Public, State of Florida
Commission number _____
Commission expires _____