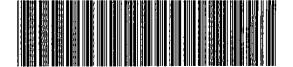
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## **COVER LETTER**

TO:		tion Section of Corporations				
SUBJE	ECT:	Je	eff Hay	y Golf LLC.		
		Na	me of Lim	nited Liability Company		
The end	closed Artic	eles of Organization ar	d fee(s) ar	e submitted for filing.		
Please	return all co	orrespondence concern	ing this m	atter to the following:		
	Jeff H	ay				
				Name of Person		
	Jeff H	ay Golf LLC.				
				Firm/Company	. ~	
_	16301	Phil Ritson V	√ay		2011 AUG -1 SECRETARY TALLAHASS	7
				Address	会 6	· ·
Ŋ	Winter (	Garden, FL 34				7177
				City/State and Zip Code	OF STATI	τ
j	jhay@co	oregolfacademy		d for future annual report notification)	07	
		E-mail address	: (to be used	a for future annual report notification)	ār 🔊	
For furt	ther informa	ation concerning this n	natter, plea	se call:	•	
Jeff H	lay			at ( 407 ) 592-8236	3	
	N	lame of Person		Area Code & Daytime Te	lephone Number	
Enclose	ed is a che	ck for the following	amount:			
\$125.00	Filing Fee	\$130.00 Filin Certificate o		\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
		<u>Mailing Addr</u>	<u>ess</u>	Street/Courier Addres		

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

AKIICEE I - M	aille.			
The name of the	Limited	Liability	Company	is:

ADTICLET

lay Golf LLC

Jeff Hay Golf LLC.

Nama

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

#### **ARTICLE II - Address:**

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

# Principal Office Address:

**Mailing Address:** 

Jeff Hay Golf LLC. 16301 Phil Ritson Way Jeff Hay Golf LLC. 16301 Phil Ritson Way Winter Garden, FL 34787

Winter Garden, FL 34787

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Ron McLinton

Name

16301 Phil Ritson Way

Florida street address (P.O. Box NOT acceptable)

Winter Garden

FL 34787

City, State, and Zip

SECRETARY OF STATE

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:

"MGR" = Manager "MGRM" = Managing Member	Name and Address:
Jeff Hay "MGR"	Jeff Hay 16301 Phil Ritson Way Winter Garden, FL 34787
	FLOATE TO THE TENTE OF THE TENT
(Use attachment if necessary)	
CLE V: Effective date, if other than the	e date of filing: (OPTIONAL) se specific and cannot be more than five business days
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CLE V: Effective date, if other than the effective date is listed, the date must b 00 days after the date of filing.)  REQUIRED SIGNATURE:	e specific and cannot be more than five business days
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CLE V: Effective date, if other than the effective date is listed, the date must be days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a member of	e specific and cannot be more than five business days
CLE V: Effective date, if other than the effective date is listed, the date must be do days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a member	exercific and cannot be more than five business days per of an authorized representative of a member.  3.408(3), Florida Statutes, the execution of this document of the penalties of perjury that the facts stated herein are true, mation submitted in a document to the Department of State y as provided for in s.817.155, F.S.)  Jeff Hay
CLE V: Effective date, if other than the effective date is listed, the date must be do days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a member	exercific and cannot be more than five business days per or an authorized representative of a member.  8.408(3), Florida Statutes, the execution of this document or the penalties of perjury that the facts stated herein are true, mation submitted in a document to the Department of State y as provided for in s.817.155, F.S.)

of Registered Agent

- \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)