Division of Corp

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Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : AGENTS AND CORPORATIONS, INC

Account Number : 120010000112 Phone

: (302)575-0875

Fax Number

: (302)575-1642

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\$160.00

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

Email Address:

FLORIDA LIMITED LIABILITY CO. SUNCITY RESORTS LLC

Certificate of Status Certified Copy Page Count Estimated Charge

A. LUNT

AUG 29 2011

EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

H11000212451 3

ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: SUNCITY RESORTS, LLC.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability
Company is:
818 Avenue C, Panama City Beach, FL 32413.

ARTICLE III – Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:

Agents and Corporations, Inc.
300 Fifth Avenue South
Suite 101-330
Naples, FL 34102

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 bereby 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.

Agepts and Corporations, Inc.

by: John L. Williams, Vice President

ARTICLE IV - Management (Check box if applicable.) []

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

ARTICLE V - Managen

The initial Manager(s) of the Limited Liability Company shall be: Adriana G. Poster

Signature of a member of an authorized sepresentative of a member (In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penaltics of perjury that the facts stated herein are true.)

Adriana G. Foster
Typed or printed name of signee