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SECRETARY OF STATE TALLAHASSEE, FLORIDA

112 JAN 12 AM 10: 2

C. LEWIS

JAN 1 3 2012

EXAMINER

## **COVER LETTER**

TO.

Registration Section
Division of Corporations

SUBJECT: OLD (	GEEZER SKEET	CLUB		· · · · · · · · · · · · · · · · · · ·
		ed Liability Con	npany	
The enclosed Articles of	Organization and fee(s) are	submitted for fil	ing.	
Please return all correspondent	ondence concerning this matt	ter to the followi	ing:	
MACK M	ANGUM	,		
		Name of Person		
.,	- <del></del>	Firm/Company		
362 MANI	GUM-CLOSE RO			
JOZ IVIAIN	GOIVI-CLOSE NO	Address	<del></del>	
<u>PERRY, FL</u>		6 131 6	·	<u> </u>
***	Cit	y/State and Zip Co	ode	
-	E-mail address: (to be used t	for future annual re	eport notification)	
For further information	concerning this matter, please	e call·		
·	concerning unis matter, prouse	o ouii.		
MACK MANGUM	1	<sub>at (</sub> 850	584-1498	
Name o	of Person	Area Co	ode & Daytime Tele	phone Number
Enclosed is a check fo	r the following amount:			
<b>√</b> \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Fi Certified C (additional co		\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registr Divisio Clifton 2661 E	Courier Address ration Section on of Corporations a Building Executive Center Cassee, FL 32301	

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Α	RT	TCI	JE I	- N	ame
А	K I	ш	ara I	- 1	ıame

The name of the Limited Liability Company is:

### OLD GEEZER SKEET CLUB, LLC

(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:	<b>Mailing Address:</b>	Mailing Address:		
P.O. BOX 832   362 Mo	enaum Close Rd			
PERRY, FL 32348 Perry F	engun Close Rd E.32347 SAME			
	,	individual or another		
HARVEY B	. TUTEN JR.	JAN 12 DRETAR) AHASSI		
	Name			
3870 US	HWY 19 SOUTH	AK (5); 26  OF STATE  FLORIDA		
<u></u>	Florida street address (P.O. Box NOT acceptable	; 26 AIE RID		
PERRY,	<sub>FL</sub> 32348	<u> </u>		
<del></del>	City, State, and Zip			

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

FILED

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows 2012 JAN 12 AM 19: 26

Title:	Name and Address:	TALLAHASSEE. FLORIDA
"MGR" = Manager "MGRM" = Managing Member		- Conto
MGR	BILLY D. PILLOW	
	2011 MORGAN WHIDDON ROAD	<u> </u>
	PERRY, FL 32347	
MGRM	KAY PARRISH	
<del></del>	1886 HOLT ROAD	
	PERRY, FL 32348	
MGRM	MACK MANGUM	
- · · · · · · · · · · · · · · · · · · ·	362 MANGUM-CLOSE RD	
	PERRY, FL 32347	
MGMR	RAGAN H. FOX III	
	2549 WOODS CREED ROAD	
	PERRY, FL 32347	
		•

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: <u>JANUARY 9,2012</u>. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Silly 7: 1100

Typed or printed name of signe

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

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