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SECRETARY OF STATE

FEB 1 4 2013 J. BRYAN

COVER LETTER

TO:	Registration S Division of Co			
SUBJE	CT: Sof	tball West Joint Ve Name of Limit	enture, LLC ed Liability Company	
The end	losed Articles o	f Organization and fee(s) are s	submitted for filing.	
Please r	eturn all corresp	ondence concerning this matt	er to the following:	
_	Donald	H. Stratton		
			Name of Person	TALLAH SSEE, FORT
	Softbal	l West Joint Ventur	e, LLC	
			Firm/Company	Ser a
	680 E. I	Main Street Ste 10	1	Fig. 2.
•			Address	岛亚 左
_	Bartow,	Florida 33830		
		Cit	y/State and Zip Code	
	flaisa@a			
_		E-mail address: (to be used i	or future annual report notification)	
For furt	her information	concerning this matter, please	call:	
Don	ald H. Stra	atton	at (863) 227-3803	}
	Name	of Person	Area Code & Daytime Telep	hone Number
		or the following amount:		
23\$ 125.6	00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	\$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	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Ci Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY ARTICLE I - Name: The name of the Limited Liability Company is: Softball West Joint Venture, 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: **Mailing Address:** 680 E. Main Street Ste. 101 680 E. Main Street Ste 101 Bartow, Florida 33830 Bartow, Florida 33830 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: Donald H. Stratton 680 E. Main Street Ste 101 Florida street address (P.O. Box NOT acceptable) Bartow 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

(CONTINUED)

Registered Agent's Signature (REQUIRED)

all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of m_X position as registered agent as provided for in Chapter 608, F.S.

Page 1 of 2

<u> Citle:</u>	Name and Address:
MGR" = Manager	<u>- </u>
MGRM" = Managing Member	
MGRM	naging Member(s): nger or Managing Member is as follows: Name and Address: Donald H. Stratton 680 F. Main Street Ste 101
	200 E. Hall Street Ste 101
	Bartow, FL 33830
Member	William E. Ruth
	19400 108 Ave. S. E., Suite 200
	Kent, WA 98031
Member	Terrence Hennesey
	2701 K Street, Ste 101 A
•	Sacramento, CA 95816
Use attachment if necessary)	
EV: Effective date, if other than th	te date of filing: (OPTION
Use attachment if necessary) EV: Effective date, if other than the lective date is listed, the date must be 190 days after the date of filing.)	te date of filing: (OPTION st be specific and cannot be more than five busin
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EV: Effective date, if other than the ective date is listed, the date must 90 days after the date of filing.) EOUIRED SIGNATURE: Signature of a member of a memb	er 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.
E V: Effective date, if other than the ective date is listed, the date must 90 days after the date of filing.) EOUIRED SIGNATURE: Signature of a membrane with section 60 constitutes an affirmation under 1 am aware that any false infor	er 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
E V: Effective date, if other than the ective date is listed, the date must 90 days after the date of filing.) EOUIRED SIGNATURE: Signature of a member of a maxwer that any false information under the support of the end of	er 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 by as provided for in s.817.155, F.S.)

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)