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N. Outligen APR 2 6 2331

(850) 245-6051.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CASE GOLF CON COSTS, LLC.

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Name of Person

CASE GOLF CONCEDES

Firm/Company

12-70 CAROUSEL WAY

Address

POYAN PAUM BEACH

City/State and Zip Code

**COMPAN COMPAN COMP

For further information concerning this matter, please call:

Poy CASE at (561) 714 5933

A ...

Enclosed is a check for the following amount:

□\$125.00 Filing Fee □\$130.00 Filing Fee &

Certificate of Status

□\$155.00 Filing Fee &

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 Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

5 GOLF CONCEPTS. 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:

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:

PALM REACH FL 33411
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

Attached are the forms and instructions to form a Florida Limit...

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

. The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGP.	ROY CASE 1270 CAROUSEL WAY POYAL PALM BEACH. FL 334 11	
	e date of filing: (OPTIONAL) st be specific and cannot be more than five business days	
REQUIRED SIGNATURE:	PR 25 F F F F F F F F F F F F F F F F F F	
(In accordance with section 60 constitutes an affirmation unde I am aware that any false infor constitutes a third degree felon	8.408(3), Florida Statutes, the execution of this document retrested the penalties of perjury that the facts stated herein are true mation submitted in a document to the Department of State are say as provided for in s.817.155, F.S.)	
Typed or printed name of signee		

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)

Page 2 of 2