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**FLORIDA LIMITED LIABILITY CO.
WOODY'S RV RESORT, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

MD 11/23

15 MAR 20 AM 11:30

ARTICLES OF ORGANIZATION WOODY'S RV RESORT, LLC

The undersigned certifies that he is hereby forming a limited liability company under the laws of the State of Florida, providing for the formation, rights, privileges, and immunities of limited liability companies for profit. He further declares that the following Articles shall serve as the Charter and authority for the conduct of business of the limited liability company.

ARTICLE I NAME AND PRINCIPAL PLACE OF BUSINESS

The name of the limited liability company shall be **WOODY'S RV RESORT, LLC** and its principal office shall be located at 4414 U.S. Highway 27 S., Sebring, Florida 33870, but it shall have the power and authority to establish branch offices at any other place or places as the sole member may designate. The mailing address shall be 4414 U.S. Highway 27 S., Sebring, Florida 33870.

ARTICLE II PURPOSES AND POWERS

The limited liability company is authorized to engage in any activity or business authorized under the Florida Statutes.

ARTICLE III MANAGEMENT

Management of this limited liability company shall be member managed.

ARTICLE IV DURATION

This limited liability company shall exist perpetually from the date of the filing of these Articles with the Florida Secretary of State, or until dissolved in a manner provided by law, or as provided in the regulations adopted by the sole member.

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ARTICLE V
INITIAL REGISTERED OFFICE AND REGISTERED AGENT

The address of the initial registered office of the limited liability company is 4414 U.S. Highway 27 S., Sebring, Florida 33870, and the name of the company's initial registered agent at that address is **WILLIAM T. DUNCAN**.

The undersigned, being the sole member of the limited liability company, certifies that this instrument constitutes the proposed Articles of Organization of **WOODY'S RV RESORT, LLC**.

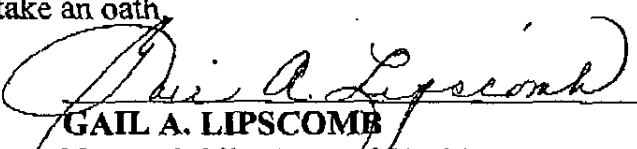
Executed by the undersigned at Lake Placid, Florida, on this Nov 5 day of November, 2015.


WILLIAM T. DUNCAN

STATE OF FLORIDA
COUNTY OF HIGHLANDS

The foregoing instrument was acknowledged before me this 5th day of November, 2015, by **WILLIAM T. DUNCAN**, who is (X) personally known to me, or who has () produced his _____ as identification who did not take an oath.



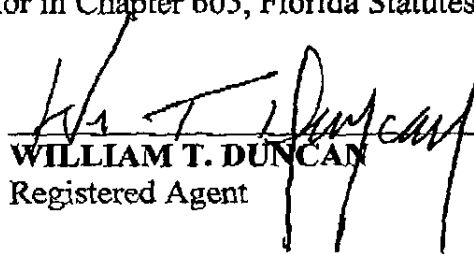

GAIL A. LIPSCOMB
Notary Public, State of Florida
(Affix Seal)

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STATEMENT

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 605, Florida Statutes.


WILLIAM T. DUNCAN
Registered Agent

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