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to:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : COGENCY GLOBAL, INC.

Account Number : 120000000088 Phone : (800)221-0102 Fax Number : (800)944-6607

> \*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:\_\_\_\_\_

# FLORIDA LIMITED LIABILITY CO. PROFESSIONAL COURSE MANAGEMENT V, MIAMI SHORES COUNT

Certificate of Status	0
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PROFESSIONAL COURSE MANAGEMENT V, MIAMI SHORES COUNTRY CLUB, LLC

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Full Entity Name:

From: Merritt Walker Fax: 15182130/3/ 10: Fax: (850) 617-6381 Page: 2 013 0610312020 1.

# ARTICLES OF ORGANIZATION OF PROFESSIONAL COURSE MANAGEMENT V, MIAMI SHORES COUNTRY CLUB, LLC

### ARTICLE I: - Name

The name of the Limited Liability Company is:

## PROFESSIONAL COURSE MANAGEMENT V, MIAMI SHORES COUNTRY CLUB, LLC

#### ARTICLE II: - Address

The mailing address and street address of the principal office of the Limited Liability Company are:

# 10000 Biscayne Boulevard Miami Shores, Florida 33138

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

Cogency Global, Inc. 115 North Calhoun Street, Suite 4 Tallahassee, Florida 32301

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, F.S.

Cogency Global, Inc., Registered Agent		₹U6 -3
	<u> </u>	70
By: Menutt Walker	<del>. :</del> -	
Name: Merritt Walker	:	
Title: Asst. Secretary	:=:	7

From: Metritt Walker Fax: 15182130737 To: Fax: (850) 617-6381

ARTICLE IV: - Management

The name and address of the individual authorized to manage and control the Limited Liability Company is:

Title Name and Address

MGR Johnny LaPonzina

10000 Biscayne Boulevard Miami Shores, Florida 33138

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization on July 30, 2020.

Johnny LaPonzina, Authorized Signer

(In accordance with section 605.0203(1)(b), 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 Section 817.155, Florida Statutes.)

### Johnny LaPonzina

Typed or printed name of signee

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Page: 3 of 3

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