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CT CORPORATION SYSTEM	4000027590146 -01/29/9901072011 ****285.00 ****285.00
Requestor's Name 660 East Jefferson Street	3
Address Tallahassea, FL 32301 222-1092 Phone	4000027590146 -01/29/9901072012 *****52.50 ******52.50
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

GOLF VISTAS, L.LC.

ARTICLE II - Address:

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

c/o Destination Vistas, L.L.C. 17 Windabout Drive Greenwhich, CT 06831

ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be:

Perpetual

ARTICLE IV - Management: (Check the appropriate box and complete the statement)

☐ The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are

Destination Vistas, L.L.C.

ARTICLE V - admission of Additional Members:

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be:

Upon the consent of all members

ARTICLE VI - Members Rights to Continue Business:

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the

99 JAN 29 PM 3: 42

occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be:

Unlimited

ARTICLE VII - Affidavit of Membership and Contributions

The undersigned member or authorized representative of a member of Golf Vistas, L.L.C. certifies:

-	the above named limited liability company has at least one member; the total amount of cash contributed by the member(s) is	\$55,000;
3)	if any, the agreed value of property other than cash contributed by member(s) is (A description of the property is attached and made a part hereto); and	\$0;
4)	the total amount of cash and property contributed and anticipated to be	
	contributed by member(s) is	\$55,000
	K m	
	Muel. Montgonerie	
	Signature of a member or an authorized representative of a member	
	· /	

(In accordance with section 608.408(3), Florida Statutes, the execution _____ of this affidavit constitutes an affirmation under the penalties of

Bruce M. Montgomerie

Duly authorized representative

SECRETARY OF STATE OF VISION OF CORPORATIONS

Filing Fee: \$250.00 for Articles and Affidavit

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1.	The name of the limited liability company is: Golf Vistas, L.L.C.	
		IF 66
2.	The name and address of the registered agent and office is:	99 JAN 29
	C T CORPORATION SYSTEM	
	(Name)	
	c/o C T CORPORATION, 1200 South Pine Island Road,	- £
	(P.O. Box not acceptable)	2
	Plantation, Florida 33324	-
	(City/State/Zip)	•
stated the ap compl	ng been named as registered agent and to accept service of process I limited liability company at the place designated in this certificate, I pointment as registered agent and agree to act in this capacity. I filly with the provisions of all statutes relating to the proper and complete uties, and I am familiar with and accept the obligations of my position.	hereby accept wrther agree to performance of
	C T CORPORATION SYSTEM	
	Cathole January 28, 1999	
	Patrick A. Nolan (Date)	
	Assistant Secretary	
	FILINGFEE: \$ 35 for Designation of Registered Agent_	