

M10000002542

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

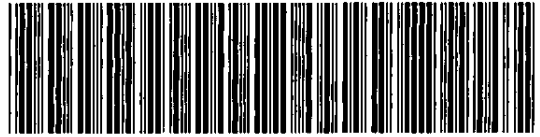
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05/17/10--01042--001 **78.75

06/07/10--01041--005 **51.25

FILED

19 JUN -2 PM 3:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

~~101-21104~~



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 18, 2010

WILLIAM PARKS
8236 VIA BELLA NOTTE
ORLANDO, FL 32836

SUBJECT: SWING SENSEI, LIMITED LIABILITY COMPANY
Ref. Number: W10000024184

RECEIVED
10 MAY 27 PM 12:21
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

*Per our discussion at
3:00 PM on 5/24/10
Thanks J. Parks*

We have received your document for SWING SENSEI, LIMITED LIABILITY COMPANY and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FOREIGN CORPORATION, but your entity is a FOREIGN LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6931.

Becky McKnight
Regulatory Specialist II
New Filing Section

Letter Number: 110A00012512

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SWING SENSEI, LLC
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

WILLIAM PARKS
Name of Person

SWING SENSEI, LLC
Firm/Company

8236 VIA BELLA NOTTE
Address

ORLANDO, FL 32836
City/State and Zip Code

Swingensei@me.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

WILLIAM PARKS at (407) 304-6843
Name of Person Area Code & Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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 ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTIONS BUSINESS IN THE STATE OF FLORIDA:

1. SWING SENSEI, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")

2. NEVADA 3. _____
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. FEBRUARY 2010 5. PERPETUAL
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")

6. FUTURE
(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. 8236 VIA BELLA NOTTE
ORLANDO, FL 32836
(Street Address of Principal Office)

8. If limited liability company is a manager-managed company, check here ☒

9. The name and usual business addresses of the managing members or managers are as follows:

WILLIAM PARKS 8236 VIA BELLA NOTTE ORLANDO, FL 32836
RYAN HARRIS 1220 MANHATTEN AVE #D MANHATTEN BEACH, CA 90266
HARPREET SURI 2950 FORSYTH ROAD WINTER PARK, FL 32792

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: _____

MARKETING AND PRODUCT MANAGEMENT OF GOLF TRAINING EQUIPMENT

William Parks
Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

WILLIAM PARKS
Typed or printed name of signer

FILED
10 JUN -2 PM 3:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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 TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

SWING SENSEI, LLC

If unavailable, the alternate to be used in the state of Florida is:

2. The name and the Florida street address of the registered agent and office are:

WILLIAM PARKS

(Name)

8236 VIA BELLA NOTTE

Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

ORLANDO FL 32836

City/State/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, Florida Statutes.

William Parks

(Signature)

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

SECRETARY OF STATE




LIMITED LIABILITY COMPANY CHARTER

I, ROSS MILLER, the Nevada Secretary of State, do hereby certify that **SWING SENSEI, LLC** did on February 9, 2010, file in this office the Articles of Organization for a Limited Liability Company, that said Articles of Organization are now on file and of record in the office of the Nevada Secretary of State, and further, that said Articles contain all the provisions required by the laws governing Limited Liability Companies in the State of Nevada.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on February 9, 2010.


ROSS MILLER
Secretary of State

Certified By: Nita Hibshman
Certificate Number: C20100209-1191
You may verify this certificate
online at <http://www.nvsos.gov/>