

TRANSMITTAL LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: CSL Golf
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: CSL Golf, Inc.
Name (Printed or typed)

18520 Ambly LN
Address

Tampa, FL 33647
City, State & Zip

813-994-9114
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

was-
11/21/0



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

January 11, 2005

CSL GOLF, INC.
% 18520 AMBLY LN
TAMPA, FL 33647

SUBJECT: CSL GOLF, INC.
Ref. Number: W05000001610

We have received your document for CSL GOLF, INC.. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$78.75. Your document will be retained in our pending file.

If you have any further questions concerning your document, please call (850) 245-6924.

Stacy Prather
Document Specialist Supervisor
New Filings Section

Letter Number: 805A00002095

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

CSL Golf, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

18520 Ambly Ln.
Tampa, FL 33647

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To engage in every aspect golf course construction, maintenance, improvement and beautification including selling products and providing services. To invest its fund in real estate, stocks bonds and any other type of investments and to own real and personal property

ARTICLE IV SHARES

necessary for providing goods and services hereby
The number of shares of stock is: authorized.

(100) One hundred shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

President- Christopher M. Leahy
Treasurer 18520 Ambly Ln.
Tampa, FL 33647

Secretary- Sarah J. Leahy
Vice Pres. 18520 Ambly Ln.
Tampa, FL 33647

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:


Christopher M. Leahy
18520 Ambly Ln.
Tampa, FL 33647

ARTICLE VII INCORPORATOR

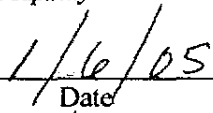
The name and address of the Incorporator is:

Christopher M. Leahy
18520 Ambly Ln.
Tampa, FL 33647

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity:



Signature/Registered Agent



Date



Signature/Incorporator



Date

RECEIVED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 JAN 24 PM 2:20