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96195156



Whereas,

ARTICLES OF ORGANIZATION OF

GOLF CENTER, L.L.C., ORGANIZED UNDER THE LAWS OF THE STATE OF ILLINOIS HAVE BEEN FILED IN THE OFFICE OF THE SECRETARY OF STATE AS PROVIDED BY THE LIMITED LIABILITY COMPANY ACT OF ILLINOIS, IN FORCE JANUARY 1, 1994.

Now Therefore, I, George H. Ryan, Secretary of State of the State of Illinois, by virtue of the powers v sted in me by law, do hereby issue this certificate of organization worder the Illinois Limited Liability Company Act.

In Testimony Whereof, Thereis set my hand and cause

the City of Springfield, this			29TH			
		_ A.D. 19_				
		the United Sta				
the two hundred and						

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Deory H Ryan
SECRETARY OF STATE

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| TOTAL 25.50
| CHECK 25.50

January 1995 **Articles of Organization** George H. Ryan Secretary of State Filing Fee \$500. Department of Business Services SUBMIT IN DUPLICATE Limited Liability Company Division Must be typewritten Room 359, Howlett Building FEB 29 1996 Springfield, IL 62756 This space for use by Secretary of State LIMITED LIABILITY CO. DIV. Date 02. 29- 1996 Payment must be made by certified GEORGE H. RYAN check, cashier's check, Illinois Assigned File # 0005. SECRETARY OF STATE attorney's check, Illinois C.P.A.'s check Filing Fee or money order, payable to *Secretary Approved: of State." Limited Liability Company Name: GOLF CENTER, L.L.C. 1. (The LEC name must contain the words limited liability company or L.L.C. and cannot contain the terms corporation, corp., incorporated, inc., ito., co., limited partnership, o: L.P.) X No. L_|Yes Transacting business under an assumed name: 2. (II YES, a Form LLC-1.20 is requirer to be completed and attached to these Articles.) The address, including county, of its principal place of business: (Post office box alone and c/o are 3. unacceptable.) 1775 Winnetta Road. Suite 100 Northfield, Illinois 60093 36-4063296 Federal Employer Identification Number (F.E.I. V.): 4. The Articles of Organization are effective on: (Check one) 5. a) X the filing date, or b) another date later than but not more than 60 days subsequent to the filing date:__ (month, rlay, year) The registered agent's name and registered office address is: 6. Registered agent: Steven Middle Initial Last Name First Name Suite <u>250</u> 1515 E. Woodfield Road, Registered Office: Suite # Street Number (P.O. Box alone and 60173 Cook Schaumburg c/o are unacceptable) County Zip Code Purpose or purposes for which the LLC is organized: Include the business code # (from IRS Form 1065) 7. (If not sufficient space to cover this point, add one or more sheets of this size.) 7980

This space for use by Secretary of State

To transact any and all lawful business for which limited liability companies may be organized under the Illinois Limited Liability Company Act.

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The latest date the company is to dissolve October 1. 8. (month, day, year)

And other events of dissolution enumerated on an attachment. (Optional)

LL C 9.	Other provisions for the regulation of the internal affairs	s of th	ne LLC per Section	n 5-5 (a) (8) included	as altachment		
	Yes KX No If yes, state the provisions(s) and the statutory cite(s) f	rom t	he ILL CA.	,	·		
10 .	a) Management is vested, in whole or in part, in management is vested, in the intervent is vested, i	jers:	₹ X Ye	s 🗍 No			
	Seiji Suzuki, 1775 Winnetka Road,	Sui	te 100, Nor	thfield, IL 60	1093		
	b) wrinagement is retained, in whole or in part, by the nilf yes, it is their names and addresses.	nemb	ers: 🔲 Ye	s KXINo			
	If no, the company has 2 or more members pursuant to	S. 5	-1 of the II LCA.	M-94 12*74₽₩			
	COOK COUNTY			RECORDING 125.00			
	RECORDER		MAIL	0.50 961 95156			
	JESSE WHITEO		*	70175150			
	ROLLING MEADOWS						
11.	The undersigned affirms, under penalties of perjury, having authority to sign hereto, that these articles of organization are to the best of my knowledge and belief, true, correct and complete.						
	Dated February 19	9.6	·				
			3				
	Signature(s) and Name(s) of Organizer(s)		Bus	iness Address(es)			
	Klanis Rodnewez - Organizer	4	1775 Wilin	etka Road, Sui	ita 100		
f. ,	Signature	1.	Number	Sireel	<u> </u>		
	Seiji Suzuki		Northfie.				
	(Type or print name and title)			City/Tuwn			
	(Name if a corporation or other entity)		State	0	Zip Code		
2.	Signature	2.	Number	Sireei			
	(Type or print name and title)	•		Cily/Town			
•	Name if a corporation or other entity)		Slate		Zip Code		
3	Signature	3	Number	Street			
	(Type or print name and title)	-		City/Town	<u> </u>		
-	(Name if a corporation or other entity) 961951	156	State		Zıp Code		

After Recording, Return To: Hanan Merza Meltzer, Purtill & Stelle 1515 E. Woodfield Rd., Ste. 250 Schaumburg, IL 60173

nal document. Carbon copy, photocopy or rubber stamp signatures may only be used

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