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(Re	equestor's Name)		
(Ad	ldress)		
(Ac	ddress)		
(Ci	ty/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificates	s of Status	
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FLORIDA DEPARTMENT OF STATE Division of Corporations

July 30, 2018

BEVERLY DOWNING 9000 NW 8TH AVE MIAMI, FL 33054

SUBJECT: GENERALS FOOTBALL BOOSTER CLUB

Ref. Number: W18000068952

We have received your document for GENERALS FOOTBALL BOOSTER CLUB and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the letters "MGRM" beside the name and address of each managing member and/or the letters "MGR" beside the name and address of each manager listed in the document. We will also accept "Authorized Representative", "Authorized Person", and "Authorized Member".

Please return 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) 245-6052.

Keyna E Page Regulatory Specialist II

Letter Number: 718A00015618

COVER LETTER

TO:	New Filing Section Division of Corporations					
SUBJE	Generals Football Booster Club					
Name of Limited Liability Company						
The en	closed Articles of Organization and fee(s) are submitted for filing.					
Please	return all correspondence concerning this matter to the following:					
	Beverly Downing					
	Name of Person					
Generals Football Booster Club						
	Firm/Company					
	9000 N.W. 8th Avenue					
	Address					
	Miami, Florida 33054					
	City/State and Zip Code					
	N/A E-mail address: (to be used for future annual report notification)					
For furth	er information concerning this matter, please call:					
	Rhonda C. McPherson 786 402-6143					
	Name of Person Area Code Daytime Telephone Number					
Enclose	d is a check for the following amount:					
]\$125.00	Filing Fee \$\ \text{S130.00 Filing Fee & Certificate of Status} \text{S155.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)}					
	Mailing AddressStreet AddressNew Filing SectionNew Filing Section					
Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 Division of Corporations Clifton Building 2661 Executive Center Circle						

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Generals Fo	ootball Booste	r Club Limited	Liability Company
(Must contain the words	"Limited Liab	ility Company.	"L.L.C.," or "LLC.")
ARTICLE II - Address:			
The mailing address and street address of the p	rincipal office	of the Limited	Liability Company is:
,	······································	or the ismined	Elability Company is.
Principal Office Add	ress:		Mailing Address:
20526 N.W. 11th Co	urt		20526 N.W. 11th Court
Min-ti Candada El			
he Limited Liability Company cannot serve:	d Office, & R	egistered Ager	Miami Gardens, Florida 33169 nt's Signature: You must designate an individual or
RTICLE III - Registered Agent, Registere The Limited Liability Company cannot serve nother business entity with an active Florida	d Office, & R as its own Reg registration.)	istered Agent. '	nt's Signature:
RTICLE III - Registered Agent, Registere The Limited Liability Company cannot serve a nother business entity with an active Florida	d Office, & R as its own Reg registration.)	istered Agent. '	nt's Signature:
RTICLE III - Registered Agent, Registere The Limited Liability Company cannot serve a nother business entity with an active Florida	d Office, & R as its own Reg registration.) registered age	istered Agent. '	nt's Signature: You must designate an individual or
RTICLE III - Registered Agent, Registere The Limited Liability Company cannot serve another business entity with an active Florida the name and the Florida street address of the	d Office, & R as its own Reg registration.) registered age Rhonda	istered Agent. \ nt are:	nt's Signature: You must designate an individual or
RTICLE III - Registered Agent, Registere The Limited Liability Company cannot serve a nother business entity with an active Florida	d Office, & R as its own Reg registration.) registered age Rhonda	istered Agent. ' int are: a C. McPherson	nt's Signature: You must designate an individual or
RTICLE III - Registered Agent, Registere The Limited Liability Company cannot serve a nother business entity with an active Florida the name and the Florida street address of the	d Office, & R as its own Reg registration.) registered age Rhonda Na	istered Agent. ' ont are: a C. McPherson ime	nt's Signature: You must designate an individual or
REFICLE III - Registered Agent, Registere The Limited Liability Company cannot serve a nother business entity with an active Florida The name and the Florida street address of the	d Office, & R as its own Reg registration.) registered age Rhonda Na	int are: a C. McPherson ime W. 11th Court	nt's Signature: You must designate an individual or

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

SECRETARY OF STATE

<u>Title:</u>	Name and Address:			
"AMBR" = Authorized Member				
"MGR" = Manager I∕M & P	RICHARD FUANC			
VVI GAY R	1 CIL ALL STURE			
	NIGHT FL 33142			
Λ -				
AMBR	Anne Kose Dovest			
	14266 NW 17th AvenuE			
	Man. FL 33059			
AUTHORIZED MEMBER	SANIG BURLOW			
	9946 N.W 24th Avenue			
	Miami, FL 33147			
	.,			
				
(Use attachment if necessary)				
	1 1 2 2 2 2 2			
ARTICLE V: Effective date, if other than the date of filing				
if an effective date is listed, the date must be specific an he date of filing.)	d cannot be more than five business days prior to or 90 days after			
***	applicable statutory filing requirements, this date will not be listed as			
the document's effective date on the Department of State'				
ARTICLE VI: Other provisions, if any. Coenevals Football Buoster	due will be working to assist			
With supplemental Finance				
the normal expentures.	for the foothall team.			
REOUIRED SIGNATURE:				
To Your	and			
Signature of a member of	r an authorized representative of a member			
Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605,0203 (1) (b), Florida Statutes.				
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 s.817.155, F.S.			
DICHAM DI	0-10			

Filing Fees:

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

SECRETARY OF STATE

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