F18000005083

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
W18-82706 RA, Suffix + Deong Form
Office Use Only



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K. SALY NOV 6 2018



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 14, 2018

COLT JOHNSON OUR NATION'S BEST SPORTS 4350 FOSSIL CREEK BLVD. FORT WORTH, TX 76137

SUBJECT: OUR NATION'S BEST SPORTS

Ref. Number: W18000082706

We have received your document for OUR NATION'S BEST SPORTS and your check(s) totaling \$87.50. 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 PROFIT CORPORATION, but your entity is a FOREIGN NON-PROFIT CORPORATION. Please complete and return the enclosed blank form(s).

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

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) 245-6051.

Karen A Saly Regulatory Specialist II

Letter Number: 418A00019234



October 23, 2018

COLT JOHNSON OUR NATION'S BEST SPORTS 4350 FOSSIL CREEK BLVD. FORT WORTH, TX 76137

SUBJECT: OUR NATION'S BEST SPORTS

Ref. Number: W18000082706

We have received your document for OUR NATION'S BEST SPORTS and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a statement containing the purpose(s) authorized by the jurisdiction of its incorporation, of which it intends to pursue in this state, pursuant to 617.1503(d), Florida Statutes.

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) 245-6051.

Karen A Saly Regulatory Specialist II

Letter Number: 018A00021803

COVER LETTER

TO:	Registration Section Division of Corporations						
SHRI	BJECT: Our Nation's Best Sports, Inc.						
ооро	Name of Co	rporation – must it	nclude suffix				
Dear S	r Sir or Madam:						
Affair	enclosed "Application by Foreign Not for airs in Florida", "Certificate of Existence ster the above referenced not for profit of	". or "Certificate o	f Status" and cl	neck are submitted to			
Please	ase return all correspondence concerning	this matter to the f	ollowing:				
	Colt Johnson						
]	Name of Person					
	Our Nation's Best Sports	Our Nation's Best Sports Firm/Company					
							
	4350 Fossil Creek Blvd.						
		Address					
	Fort Worth, TX 76137						
	City	City/State and Zip Code					
	cjohnson@nbs.com						
	E-mail address: (to be us	ed for future annua	al report notific	ation)			
For fu	further information concerning this matte	er, please call:					
Colt J	It Johnson	817 at ()	605-2206				
	Name of Person	Area Code	Daytime Tel	lephone Number			
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327			STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building				
	Tallahassee, FL 32314			ve Center Circle			
Enclos	losed is a check for the following amoun	t:					
5 70	\$70.00 Filing Fee S70.00 Filing Fee Certificate of S		Filing Fee & ed Copy	S87.50 Filing Fee, Certificate of Status of Certified Copy			

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

1. Our reaction's nest sports me.			
(Name of corporation: must inc import in language as will clear in the name at present. "Compa	clude the word "INCORPORATE rly indicate that it is a corporation iny" or "Co." may not be used as	D" or "CORPORATION" or words or abbre instead of a natural person or partnership if a corporate suffix by a nonprofit corporation	viations of like not so contained .)
(If name unavailable in Florida	a. enter alternate corporate name	adopted for the purpose of transacting business	ess in Florida)
2. Texas			
(State or country under the la	aw of which it is incorporated)	(FEI number, if applicable)	
110500			
(Date of Incorpor	ration)	(Date of duration, if other than pe	rpetual)
6. (Data tiret conducted affair, in I	Electric if we is to enviorant in Co.	sections 617.1501 & 617.1502, F.S. to determi	
7. 4350 Fossil Creek Blvd. Fort		sections 017.1501 & 017.1502, r.s, to determi	me penany nabimy,)
7. ————————————————————————————————————		ffice address)	
	(Timesparo	mee addressy	
	(Current mailing a	address, if different)	
		·	
8 Noneralit buying coop	erestive composed of inde	made of smaller and merchandise	retailers
(Purpose(s) of corporation auth	horized in home state or country	pendent sporting goods merchandise to be carried out in the state of Florida)	7. × 8
O Name and A	and the state of t		T - Z
9. Name and street address of	Plorida registered agent: (P.C	J. Box <u>NOT</u> acceptable)	
Jim Chandley			5 7
Name:		<u> </u>	
Office Address 5423 Village	Drive		E TO
Office Address.		22066	TILED
Office Address: 5423 Village Rockledge			AH 9: 00
Office Address.		, Florida 32955 (Zip Code)	AH 9: 00
Rockledge 10. Registered agent's acce	(City)	, Florida 32955(Zip Code)	LONDA LONDA
Rockledge 10. Registered agent's accellaving been named as registered.	(City) ptance: tered agent and to accept serv	, Florida 32955 (Zip Code)	oration at the place
Rockledge 10. Registered agent's accellaving been named as registed designated in this application further agree to comply with	(City) ptance: tered agent and to accept serv 1. I hereby accept the appoint the provisions of all statutes		oration at the place
Rockledge 10. Registered agent's accellaving been named as registed designated in this application further agree to comply with	(City) ptance: tered agent and to accept serv 1. I hereby accept the appoint the provisions of all statutes	, Florida 32955 (Zip Code)	oration at the place
Rockledge 10. Registered agent's accellaving been named as registed designated in this application further agree to comply with	(City) ptance: tered agent and to accept serv 1. I hereby accept the appoint the provisions of all statutes		oration at the place
Rockledge 10. Registered agent's accellaving been named as registed designated in this application further agree to comply with	(City) ptance: tered agent and to accept serv 1. I hereby accept the appoint the provisions of all statutes		oration at the place
Rockledge 10. Registered agent's accellaving been named as registed designated in this application further agree to comply with	(City) ptance: tered agent and to accept serve, I hereby accept the appoint the provisions of all statutes the and accept the obligations of the collinary of the obligations of the ob	, Florida 32955	oration at the place
Rockledge 10. Registered agent's accellaving been named as registed designated in this application further agree to comply with duties, and I am familiar with	ptance: tered agent and to accept serve, I hereby accept the appoint the provisions of all statutes the and accept the obligations of the control of the con		oration at the place oct in this capacity. I formance of my
Rockledge 10. Registered agent's accellaving been named as registed designated in this application further agree to comply with duties, and I am familiar with	ptance: tered agent and to accept served. I hereby accept the appoint the provisions of all statutes the and accept the obligations of existence duly authenticated accept the provisions of existence duly authenticated acceptance duly acceptance	, Florida 32955	oration at the place ect in this capacity. I formance of my

12: Names and addresses of officers and/or directors

2: Names and addresses of officers and/or directors	18 NOV-5 AM
a. DIRECTORS	SEGGER SAM
hairman:	IALLAHASSES, FLO
ddress:	
ice Chairman:	
ddress:	
virector:	
Address:	
Pirector:	
ddress:	
6. OFFICERS	
resident:	
4350 Fossil Creek Blvd. ddress:	
Fort Worth, TX 76137	
ice President:	
ddress:	
Angela Mooney	
4350 Fossil Creek Blvd. Fort Worth, TX 76137	
reasurer:	
OTF: If necessary, you may attach an addendum to the application listing	
3. (Signature of Chairman, Vice Chairman, or any officer listed in	n number 12 of the application)

(Typed or printed name and capacity of person signing application)



Rolando B. Pablos Secretary of State

Office of the Secretary of State

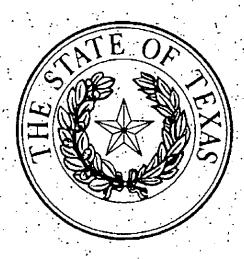
Certificate of Fact

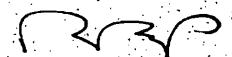
The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles of Incorporation for OUR NATION'S BEST SPORTS (file number 22915501), a Domestic Nonprofit Corporation, was filed in this office on November 25, 1966.

It is further certified that the entity status in Texas is in existence.



In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on August 15, 2018.





Rolando B. Pablos: Secretary of State