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| Special Instructions to Filing | Officer: | | |
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Office Use Only



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Way.

COVER LETTER

| _ | tration Section ion of Corporations | | | | |
|---|--|--------------------|--|--|--|
| SUBJECT: | Sports Facilities Team Member | s, Inc. | | | |
| Name of corporation - must include suffix | | | | | |
| Dear Sir or M | adam: | | | | |
| "Certificate of | "Application by Foreign Corp f Existence," or "Certificate of ced foreign corporation to tran | f Good Stan | Authorization to Transact Business in Florida," ding" and check are submitted to register the ss in Florida. | | |
| Please return a | all correspondence concerning | this matter | to the following: | | |
| Alex Dubur | | | | | |
| | | Name of | Person | | |
| Sports Facilitie | s Companies | | | | |
| | | Firm/Com | pany | | |
| 600 Cleveland | Street, Suite 910 | | | | |
| | | Addro | SS | | |
| Clearwater, FL | 33755 | | | | |
| | | City/State a | nd Zip code | | |
| adubur@sporta | dvisory.com | | | | |
| | E-mail address: (| to be used f | or future annual report notification) | | |
| For further inf | ormation concerning this man | ter, please c | all: | | |
| Alex Dubur | at | 813 | _) | | |
| Name | e of Person | Area Code | Daytime Telephone Number | | |
| Regist Division The Co 2415 Y | ET/COURIER ADDRESS: tration Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303 | | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | | |
| | theck for the following amour tek payable to: FLORIDA DEP, ng Fee S78.75 Filing F Certificate of S | ARTMENT Fee & □ | OF STATE \$78.75 Filing Fee & Certified Copy Certificate of Status & Certified Copy | | |

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

| · (Enter name of a | | | |
|---|--|--|--|
| | orporation; must include "INCORPORATED orp," "Inc." "Co." or "Corp.") | ." "COMPANY," "CORPORATIO | N." |
| (If name unavail | able in Florida, enter alternate corporate name | adopted for the purpose of transacti | ng business in Florida) |
| Delaware | 3 | | |
| (State or countr | y under the law of which it is incorporated) | (FEI number, if a | pplicable) |
| 1/14/2021 | 5 | | |
| (Date | (Date of incorporation) 5. (Date of duration. | | than perpetual) |
| | | | |
| | (Date first transacted business (SEE SECTIONS 607.1501 & 607.1 | in Florida, if prior to registration) 502, F.S., to determine penalty liabi | lity) |
| 600 Cleveland St | reet, Suite 910, Clearwater, FL 33755 | | • |
| · - | | fice <u>street</u> address) | |
| | | | |
| | (Current maili | ng address, if different) | |
| | | | |
| 3. 2 | | | |
| Name and stree | et address of Florida registered agent: (P. | O. Box <u>NOT</u> acceptable) | |
| Name and <u>stree</u> Name: | et address of Florida registered agent: (P. Jason Clement | O. Box <u>NOT</u> acceptable) | |
| Name: | | O. Box <u>NOT</u> acceptable) | |
| Name: | Jason Clement 600 Cleveland Street, Suite 910 | | 21 |
| Name: | Jason Clement 600 Cleveland Street, Suite 910 | O. Box <u>NOT</u> acceptable) , Florida 33755(Zip code) | 21 Jul 18 18 Jul 18 18 Jul |
| Name: Office Address: | Jason Clement 600 Cleveland Street, Suite 910 Clearwater (City) | | 21 Jul 16 21 Jul 16 15 15 15 15 15 15 15 15 |
| Name: Office Address: . Registered ag | Jason Clement 600 Cleveland Street, Suite 910 Clearwater (City) ent's acceptance: | , Florida 33755 (Zip code) | 21 July 15 |
| Name: office Address: Registered ag laving been nan esignated in this | Jason Clement 600 Cleveland Street, Suite 910 Clearwater (City) ent's acceptance: red as registered agent and to accept serv application, I hereby accept the appoint | . Florida 33755 (Zip code) rice of process for the above state ment as registered agent and ag | ed corporation at the place ree to act in this capaci |
| Name: office Address: Registered aglaving been nanesignated in this | Jason Clement 600 Cleveland Street, Suite 910 Clearwater (City) ent's acceptance: red as registered agent and to accept serv application, I hereby accept the appoint omply with the provisions of all statutes | . Florida 33755 (Zip code) rice of process for the above state ment as registered agent and agreelative to the proper and comple | ed corporation at the place ree to act in this capaci |
| Name: Office Address: Registered aglaving been nanesignated in this | Jason Clement 600 Cleveland Street, Suite 910 Clearwater (City) ent's acceptance: red as registered agent and to accept serv application, I hereby accept the appoint | . Florida 33755 (Zip code) rice of process for the above state ment as registered agent and agreelative to the proper and comple | ed corporation at the place ree to act in this capaci |
| Name: Office Address: Registered aglaving been nanesignated in this | Jason Clement 600 Cleveland Street, Suite 910 Clearwater (City) ent's acceptance: red as registered agent and to accept serv application, I hereby accept the appoint omply with the provisions of all statutes | . Florida 33755 (Zip code) rice of process for the above state ment as registered agent and agreelative to the proper and comple | ed corporation at the place to act in this capacite to performance of my |
| Name: Office Address: Registered ag laving been nan esignated in this urther agree to c | Jason Clement 600 Cleveland Street, Suite 910 Clearwater (City) ent's acceptance: red as registered agent and to accept serv application, I hereby accept the appoint omply with the provisions of all statutes | . Florida 33755 (Zip code) rice of process for the above state ment as registered agent and agreelative to the proper and comple | ed corporation at the place to act in this capacite to performance of my |

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

| A. DIRECTORS | • | | | | |
|--|--|--------------------------|-----------------------------|--|--|
| □Сһаігтап | Name: Jason Clement | □ Chairman | Name: | | |
| □Vice Chairman | Address: 3633 Douglas Place | □Vice Chairman | Address: 318 Belle Isle Ave | | |
| □Director | Palm Harbor, FL 34683 | □Director | Belleair Beach, FL 33786 | | |
| ■ President | | □President | ***** | | |
| □Vice President | | □Vice President | | | |
| □Secretary | ☐Treasurer | ■ Secretary | □Treasurer | | |
| □Other | Other | □Other | Other | | |
| □Chairman □Vice Chairman | Name: Robert Stout Name: 1660 Gulf Blvd, PH8 Address: Clearwater Beach, FL 33767 | □Chairman □Vice Chairman | Name: | | |
| □Director | | □Director | | | |
| □President □Vice President | | □President | | | |
| | | □Vice President | | | |
| ☐ Secretary | Treasurer | Secretary | ☐Treasurer | | |
| □Other | Other | Other | Other | | |
| □Chainnan | Name: | □Chairman | Name: | | |
| □Vice Chairman | Address: | □Vice Chairman | Address: | | |
| □Director | | □Director | | | |
| □President | | □President | | | |
| □Vice President | | □Vice President | | | |
| □Secretary | □Treasurer | ☐ Secretary | □Treasurer | | |
| □Other | Other | □Other | Other | | |
| Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form. 12. Signature of Director or Officer | | | | | |
| The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that 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. Jason Clement | | | | | |





I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "SPORTS FACILITIES TEAM MEMBERS, INC."

IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS

IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE

RECORDS OF THIS OFFICE SHOW, AS OF THE EIGHTH DAY OF JUNE, A.D.

2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SPORTS

FACILITIES TEAM MEMBERS, INC." WAS INCORPORATED ON THE FOURTEENTH

DAY OF JANUARY, A.D. 2021.

Authentication: 203395950

Date: 06-08-21