

LO100000 2383

Soccer Athletic

3831 W. Vine ST #52

Kissimmee, FL 34741

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____ (Corporation Name) _____ (Document #) 800003631278--5
-02/02/01--01110--006
***125.00 ***125.00
2. _____ (Corporation Name) _____ (Document #)
3. _____ (Corporation Name) _____ (Document #)
4. _____ (Corporation Name) _____ (Document #)

- ☐ Walk in ☐ Pick up time ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

Examiner's Initials

LO1-2383
al



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

February 5, 2001

SOCCER ATHLETIC
3831 W. VINE STREET #52
KISSIMMEE, FL 34741

SUBJECT: SOCCER ATHLETIC, LLC
Ref. Number: W01000002706

We have received your document for SOCCER ATHLETIC, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a 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) 487-6020.

Tammi Cline
Document Specialist

Letter Number: 201A00007001

FILED
01 FEB 12 PM 2:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED
LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:
SOCCER ATHLETIC, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

**3831 W. VINE ST #52
KISSIMMEE, FL34741, USA**

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's
Signature:**

The name and the Florida street address of the registered agent are:

Name: **MR. MOHAMED ALY OSMAN**

Florida street address (P.O. Box NOT acceptable): **3831 W. VINE ST #52**

City, State, and Zip: **KISSIMMEE, FL34741, USA**

Having been named as registered agent and to accept service of process for the abovestated 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 608, F.S..




Registered Agent's Signature

Article IV - Management (Check box if applicable.)

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)



Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(5), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

MR. MOHAMED ALY OSMAN
Typed or printed name of signer

FILED
01 FEB 12 PM 2:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA