

LO3 000002853

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

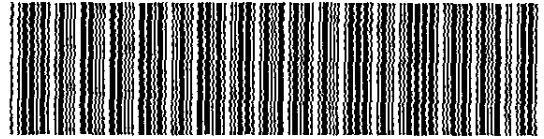
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03 JUN 23 11:10:12
TALLAHASSEE, FLORIDA

LO3-2853
92

NIEVES MELON TAX & ACCOUNTING SERVICES INC.
1486 S. SEMORAN BLVD.
ORLANDO FL. 32807
TEL.407-381-6137 FAX 407-381-9168

DATE 1/18/03

FLORIDA DEPARTMENT OF STATE
BUREAU OF CORPORATE RECORDS
DIVISION OF CORPORATIONS
P.O. BOX 6327
TALLAHASSEE, FL. 32314

RECEIVED
FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

03 JAN 23 PM 10:42

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Dear Sirs:

Enclosed you will find the Articles of Organization for Florida Limited Liability

Company for SOCCER ORLANDO LLC

Along with a check for 125.00 for filing, certified copy, and registered agent designation fees.

Please send acknowledgement to the above name and address.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SOCCER ORLANDO "L.L.C."

ARTICLE II - Address:

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

4368 MIDDLEBROOK RD. ORLANDO FL. 32811

ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be:

PERPETUAL EXISTENCE

ARTICLE IV - Management:

(Check the appropriate box and complete the statement)

☐ The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

☒ The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

SILVIO DOCARMO

4368 MIDDLEBROOK RD.
ORLANDO FL. 32811

ARTICLE V - Admission of Additional Members:

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLE VI - Members Rights to Continue Business:

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be:

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TALLAHASSEE, FLORIDA

ARTICLE VII - Affidavit of Membership and Contributions

The undersigned member or authorized representative of a member of _____
_____ certifies:

- 1) the above named limited liability company has at least one member;
- 2) the total amount of cash contributed by the member(s) is \$ _____;
- 3) if any, the agreed value of property other than cash contributed by member(s) is \$ _____;
(A description of the property is attached and made a part hereto.); and
- 4) the total amount of cash and property contributed and anticipated to be contributed by member(s) is \$ _____.

Silvio DeCarma
Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

SILVIO DECARMA
Typed or printed name of signee

Filing Fee: \$250.00 for Articles and Affidavit

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES,
THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING
STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN
THE STATE OF FLORIDA.

1. The name of the limited liability company is: _____

SOCCER ORLANDO "L.L.C."

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

SILVIO DOCARMO

NAME

4368 MIDDLEBROOK RD

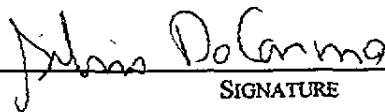
Florida street address (P. O. Box NOT ACCEPTABLE)

ORLANDO

FL 32811

CITY, STATE AND ZIP

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.



SIGNATURE

Filing Fee: \$ 35 for Designation of Registered Agent

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IN WITNESS WHEREOF, I the undersigned sign my name this 18th day
of JANUARY, 2003.

and affirm under the penalties of perjury that the statements in these Articles of Organization are true.

* Silvio Docarmo

State of Florida

County of ORANGE

On this date JANUARY 18, 2003, before me personally appeared,

SILVIO DOCARMO

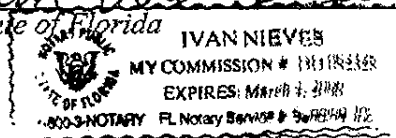
_____ to me known and known to me to be the individual
described in and who

executed the foregoing instrument, and such person duly acknowledged to me that he understood the
meaning of the

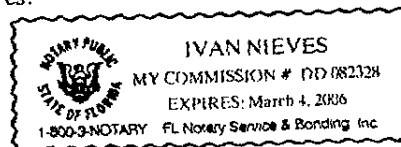
instrument and that he executed the same as his act and deed, and as a member of the L.L.C.
named therein, and with

full authority to act on behalf of such L.L.C., and that he is over the age of 18.

Ivan Nieves
Notary Public-State of Florida



My commission expires:



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STATE OF FLORIDA
TALLAHASSEE, FLORIDA