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## TRANSMITTAL LETTER

TO: Registration Sect Division of Corp			
SUBJECT: Soccer Aca	ademy of the Americas, LL		
	(Name of Limited	Liability Company)	
The enclosed Articles of C	Organization and fee(s) are su	bmitted for filing.	
Please return all correspor	ndence concerning this matter	to the following:	
Ismael Ro	que-Velasco	CD	
	(N	fame of Person)	
Soccer Academy of th	ne Americas, LLC		
	(F	'irm/Company)	
8040 SW 54ti	h Court		
<u></u>		(Address)	
Miami,	Florida 33143 (City/S	State and Zip Code)	
For further information co	oncerning this matter, please c	eall:	
Ismael Roque-Velasco (Name o	f Person)	at ( 305	elephone Number)
Enclosed is a check for	the following amount:	,	
☐ \$125.00 Filing Fee	<b>ℤ</b> \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Registra Division 409 E. C	ET ADDRESS: ation Section n of Corporations Gaines Street ssee, Florida 32399	MAILING A Registration S Division of Co P.O. Box 6327 Tallahassee, F	ection Disporations

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	y is:
Soccer Academy of the Americas, LLC	
ARTICLE II - Address:	
	he principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
Ismael Roque-Velasco	Ismael Roque-Velasco
8040 SW 54th Court	8040 SW 54th Court
Miami, Florida 33143	Miami, Florida 33143
ARTICLE III - Registered Agent, Regist	tered Office, & Registered Agent's Signature:
The name and the Florida street address of	the registered agent are:
Ismael Roque-Velasco	
N	Jame
8040 SW 54th Court	
Florida stree	et address (P.O. Box NOT acceptable)
Miami, Florida 33143	FL
City, S	tate, and Zip
liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and comple	d to accept service of process for the above stated limited d in this certificate, I hereby accept the appointment as pacity. I further agree to comply with the provisions of all the performance of my duties, and I am familiar with and registered agent as provided for in Chapter, 608, F.S
Registered A	gent's Signature  SEP - 9 A II:  SEP - 9 A III:

Page 1 of 2

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM _	Ismael Roque-Velasco
	8040 SW 54th Court
	Miami, Florida 33143
Use attachment if necessary)	
NOTE: An additional article i	must be added if an effective date is requested.
REQUIRED SIGNATURE:	ASO
Signature of a m	nember or an authorized representative of a member.
(In accordance w of this document	rith section 608.408(3), Florida Statutes, the execution constitutes an affirmation under the penalties of perjury tated herein are true.)
Ismael Roque-	Velasco
	Typed or printed name of signee
Filing Fees:	

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)