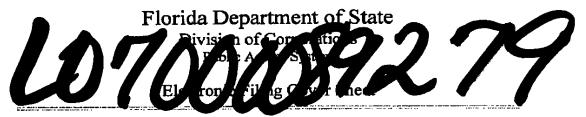
Division of Corporations

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DMsion of Corporations Fax Number (850)205-0383

on: Account Name : A 1 A CORPORATE SERVICES, INC. Account Number : I20010000247 Phone : (800)494-3124 Fax Number : (305)675-2811

FLORIDA/FOREIGN LIMITED LIABILITY C

Southern Elite Sports LLC

Certificate of Status	0
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ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608, F.S.

ARTICLE I NAME

The name of the Limited Liability Company is: Southern Elite Sports LLC

TO THE PROPERTY OF THE PARTY OF

ARTICLE II ADDRESS

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

and the second second second

1275 Orangeview Lane

Hollday Florida 34691

ARTICLE III REGISTERED AGENT, REGISTERED OFF REGISTERED AGENT SIGNATURE

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

Paul Micklow

enging spagning

1275 Orangeview Lane

Holiday Florida 34691

Having been named as registered agent 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 as provided for in Chapter 608, F.S.

Paul Micklow Registered Agent's Signature

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PAGE 2 Southern Elite Sports LLC

ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member-Managed Company.

ARTICLE V MEMBERS (optional)

MANAGING MEMBER

Paul Micklow

1275 Orangeview Lane

Hollday Florida 34691

MANAGING MEMBER
Jon Micklow
1275 Orangeview Lane
Holiday Florida 34691

MANAGING MEMBER
Jeffrey Micklow
1275 Orangeview Lane
Holiday Florida 34691

MANAGING MEMBER
Deborah Micklow
1275 Orangeview Lane
Holiday Florida 34691

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SECRETARY OF STATE

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PAGE 3 Southern Elite Sports LLC

MANAGING MEMBER
Michelie Micklow
1275 Orangeview Lane
Holiday Florida 34691

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Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

NAME OF SIGNER Paul Micklow
Typed or printed name of signee

PAUL Mickley

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SECRETARY OF STATE
TALLAHASSEF, FI ORIGA

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