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(Requestor's Name)
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(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
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(Business Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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Special Instructions to Filing Officer:
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ON APR -2 PH 4: 83

J. BRYAN

APR - 3 2008

EXAMINER

COVER LETTER

то:	Registration Division of C							
SUBJE	ECT: All Co	each Sports, LLC					_	
•		(Name of Limit	ed Liab	ility Comp	any)			
The en	closed Articles	of Organization and fee(s) are	submitt	ed for filin	ıg.			
Please	return all corres	pondence concerning this matt	er to th	e following	g:			
	Ann Rayn	nond						
			(Name o	of Person)				•
	All Coach	Sports, LLC						
	 	· · · · · · · · · · · · · · · · · · ·	(Firm/C	Company)		 		•
	1672 SE	Mistletoe Street						
		···· ·· · · · · · · · · · · · · · · ·	(Ad	dress)				•
	Port St. L	ucie, FL 34983						. (~ ?
		(Cit	y/State a	and Zip Cod	e)		180	NISE SE
For fur	ther information	n concerning this matter, please	e call:				APR -2	ON OF C
·Ann	Raymond	ł	at (772	, 344-195	50	PH	0876
	(Nam	e of Person)		(Area Coo	le & Daytime Te	lephone Number)	ի։ 03	N OF CORPORATIONS
Enclos	sed is a check f	for the following amount:			_	_		S
□\$125.	00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Ce	55.00 Filinertified Co Iditional cop	_	\$160.00 Filing I Certificate of St Certified Copy (additional copy is	atus &	l)
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Registrate Division Clifton 1 2661 Ex	Courier Address tion Section of Corporation Building secutive Center (see, FL 3230)	ns.		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

All Coach Sports, LLC			
(Must end with the words "Lir	mited Liability Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street address	of the principal office of the Limited Liabili	ity Comps	any ie
-		ny Compa	any is.
Principal Office Address:	Mailing Address:		
1682 SE Mistletoe Street	1682 SE Mistletoe Street	<u></u>	
			
(The Limited Liability Company cannot serve as its	egistered Office, & Registered Agent's Sig		
business entity with an active Florida registration.)	ss of the registered agent are:		SECRE DIVISION
business entity with an active Florida registration.) The name and the Florida street addres	ss of the registered agent are:	or another 08 APR -2	FIL SECRETAR DIVISION OF (
business entity with an active Florida registration.) The name and the Florida street addres	ss of the registered agent are: Name	08 APR -2	FILED SECRETARY OF DIVISION OF CORF
business entity with an active Florida registration.) The name and the Florida street addres Ann Raymond 1682 SE Mistl	ss of the registered agent are: Name	08 APR -2 PM	FILED SECRETARY OF STA BIVISION OF CORPORA
business entity with an active Florida registration.) The name and the Florida street addres Ann Raymond 1682 SE Mistl	ss of the registered agent are: Name etoe Street a street address (P.O. Box NOT acceptable)	08 APR -2 PM 4:	SECRETARY OF STATE DIVISION OF CORPORATION
The name and the Florida street address Ann Raymond 1682 SE Mistle Florida Port St. Lucie,	Name etoe Street a street address (P.O. Box NOT acceptable)	08 APR -2 PM	FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

"MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGRM	Janet R. Biber	
	1672 SE Mistletoe Street	
	Port St. Lucie, FL 34983	
MGR	Ann Raymond	
	1682 SE Mistletoe Street	
	Port St. Lucie, FL 34983	
MGR	Kenneth Raymond	
	1682 SE Mistletoe Street	
	Port St. Lucie, FL 34983	25
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TT 1		. E.
I loo ottookusont it maaaaaaamil		62
Use attachment if necessary)		
LE V: Effective date, if other than the c	•	TION
LE V: Effective date, if other than the offective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE:	date of filing: (OP specific and cannot be more than five busing the specific and cannot be more than five busing the specific and cannot be more than five busing the specific and cannot be more than five busing the specific and cannot be more than five busing the specific and cannot be more than five busing the specific and cannot be more than five busing the specific and cannot be more than five busing the specific and cannot be more than five busing the specific and cannot be more than five busing the specific and cannot be more than five busing the specific and cannot be more than five busing the specific and cannot be more than five busing the specific and cannot be more than five busing the specific and cannot be more than five busing the specific and cannot be more than five busing the specific and cannot be more than five busing the specific and cannot be more than five busing the specific and cannot be specific as the specific as the specific and cannot be specific as the specific and cannot be specific as the specifi	TION
REQUIRED SIGNATURE: Signature of a member (In accordance with sect	r or an authorized representative of a member. tion 608.408(3), Florida Statutes, the execution tutes an affirmation under the penalties of perjury	TION
LE V: Effective date, if other than the confective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE: Signature of a member (In accordance with sect of this document constitution)	r or an authorized representative of a member. tion 608.408(3), Florida Statutes, the execution tutes an affirmation under the penalties of perjury erein are true.)	TION

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)