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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : LEGALZOOM.COM INC.
Account Number : I20010000062
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Fax Number : (323) 962-3889

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TALLAHASSEE, FLORIDA

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FLORIDA/FOREIGN LIMITED LIABILITY CO.

Antelope Players, LLC

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EXAMINER

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COVER LETTER**TO: Registration Section
Division of Corporations****SUBJECT: Antelope Players, LLC**

(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Karmelia Fredrick

(Name of Person)

Legalzoom.com, Inc.

(Firm/Company)

7083 Hollywood Blvd., Ste. 180

(Address)

Los Angeles, CA 90028

(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Ryan Moran

(Name of Person)

at (323) 962-8600 ext. 529
(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☒ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Antelope Players, LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:858 Galston Drive, Winter Springs, FL 32708**Mailing Address:**858 Galston Drive, Winter Springs, FL 32708**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

United States Corporation Agents, Inc.

Name

13302 Winding Oaks Blvd. Suite A-100Florida street address (P.O. Box **NOT** acceptable)Tampa

FL

33612-3425

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 as provided for in Chapter 608, F.S.



Registered Agent's Signature: Karmelle Fredrick, United States Corporation Agents, Inc.

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Ann H. Hoekstra
858 Galston Drive, Winter Springs, FL 32708

MGRM

Julie R. MacPherson
858 Galston Drive, Winter Springs, FL 32708

MGRM

Mary Dennis
858 Galston Drive, Winter Springs, FL 32708


MGRM

Teresa Lynnd Kowalski
858 Galston Drive, Winter Springs, FL 32708FILED
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(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:
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.)

Karmella Fredrick, Legalzoom.com, Inc.

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)

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**Attachment to
Articles of Organization of
Antelope Players, LLC**

Additional member are:

Name of Member

Kimberly A. Veltri
Patricia M. Silveira
Cythia Ross
Abigail Thomason

Address

858 Galston Drive, Winter Springs, FL 32708
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