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(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	e) -
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filina Officer:	
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DIVISION OF CORPORATION

Office Use Only

Registration Section

Division of Corporations

PO Box 6327

Tallahassee, FL

32314

September 28 2010

Dear Sir/Madam

Enclosed please find my application for a new LLC "Sargent Sports LLC"

My contact information is:

Douglas Flood

8126 Emerald Ave

Parkland, FL

33076

Phone-954-346-8579

Email dougflood1@aol.com

If there are any questions regarding this application, please contact me at the above address, phone, email, etc

Sincerely

Douglas Flood

COVER LETTER

TO: Registration Division of C			
SUBJECT:	argent S Name of Limit	ports LLC ad Liability Company	
The enclosed Articles	of Organization and fee(s) are	submitted for filing.	
Please return all corres	spondence concerning this mat	ter to the following:	
	Douglas	Flood Name of Person	
-		Firm/Company	
<u></u>	8126	Emerald Av	<u> </u>
	Parkland		
d	ounflood (PL 33070 y/State and Zip Code Daol.com. or future annual report notification)	
For further information	concerning this matter, please		
Douglas Name	Flood of Person	at (954) 346 - 8576 Area Code & Daytime Telephone Numb	? er
Enclosed is a check f	for the following amount:		
□\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Copy Certificated Copy is enclosed Certified Copy is enclosed	te of Status &
	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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Must end with the words "Isimited Liability Company, "L.L.C.," or "	LLC.")
ARTICLE II - Address:	
The mailing address and street address of the principal office of the l	Limited Liability Company is:
Principal Office Address: Mailing Address:	
8126 Emerald Ave -> Same	
33076	
business entity with an active Florida registration.)	nate an individual or another
(The Limited Liability Company cannot serve as its own Registered Agent. You must design business entity with an active Florida registration.) The name and the Florida street address of the registered agent are:	nate an individual or another
(The Limited Liability Company cannot serve as its own Registered Agent. You must design business entity with an active Florida registration.) The name and the Florida street address of the registered agent are:	nate an individual or another
(The Limited Liability Company cannot serve as its own Registered Agent. You must design business entity with an active Florida registration.)	
(The Limited Liability Company cannot serve as its own Registered Agent. You must design business entity with an active Florida registration.) The name and the Florida street address of the registered agent are:	SECRETARY OF CORP

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 (REQUIRED)

(CONTINUED)
Page 1 of 2

"MGR" = Manager	
"MGRM" = Managing Member	
MGRM	Pouglas Flood 8126 Emerald Auc. Parkland Fl 33076
MGR	1. + =1. 1
<u> </u>	- Margarel (00d 8126 Emerald Ave
	Parkland, IPL 33076
(Line attachment if managemy)	
(Use attachment if necessary)	
CLE V: Effective date, if other than the	date of filing: (OPTIONA
CLE V: Effective date, if other than the	date of filing: (OPTIONA e specific and cannot be more than five business day
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CLE V: Effective date, if other than the effective date is listed, the date must be 90 days after the date of filing.)	e specific and cannot be more than five business day
CLE V: Effective date, if other than the effective date is listed, the date must be 90 days after the date of filing.)	e specific and cannot be more than five business day
CLE V: Effective date, if other than the effective date is listed, the date must be 90 days after the date of filing.) REQUIRED SIGNATURE:	e specific and cannot be more than five business day
CLE V: Effective date, if other than the effective date is listed, the date must be 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a member (In accordance with sec	e specific and cannot be more than five business day
CLE V: Effective date, if other than the effective date is listed, the date must be 00 days after the date of filing.) REQUIRED SIGNATURE: Signature of a member (In accordance with sec	r or an authorized representative of a member. ation 608.408(3), Florida Statutes, the execution tutes an affirmation under the penalties of perjury

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

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

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation

Filing Fees:

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)