211000006962

	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
—		
☐ PICK-UF	P WAIT	MAIL
	(Business Entity Name)	
	(Document Number)	
Certified Copies	Certificates of	Status
Special Instructions	s to Filing Officer:	
	A 1 1 1	NIT I

A. LUNT

JAN 1 8 2010

EXAMINER

Office Use Only



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COVER LETTER

TO:	Registration Division of	n Section Corporations		•	e i		
SUBJE	The	Sports Informer Ll	_C				
. 50562			ed Liability Comp	any	,		
The end	closed Articles	of Organization and fee(s) are	submitted for filin	g,			
Please	return all corre	spondence concerning this mat	ter to the following	g:	1 1		
	Adam C	Gordon	Name of Person				
		•	Name of rerson		•		
	The Spo	orts Informer LLC	· · · · · · · · · · · · · · · · · · ·		,		
		j v	Firm/Company		•		
	4000 Sc	outhwest 37th Boul	evard				
•		1	Address				
(Gainesvil	le, FL 32608 ;			SF.	~	
•	:		y/State and Zip Cod	e		=	
_	adamrgor	don@gmail.com			#5	JAN	
	į	E-mail address: (to be used	for future annual rep	ort notification)	1335	7	
For fur	ther information	on concerning this matter, pleas	e call:			PH 178	ŗ
Ross	Romero		at (561	、706-8585			e de la companya de l
	Nan	ne of Person		e & Daytime Telep	hone Number	=	
Enclos	ed is a check	for the following amount:					
\$125.00	Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filin Certified Co (additional cop	ру	\$160,00 Filing I Certificate of Sta Certified Copy (additional copy is e	atus &	
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrat Division Clifton E 2661 Ex	ourier Address ion Section of Corporations Building ecutive Center Ci see, FL 32301	rcle		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

The Sports Informer LLC	
(Must end with the words "Limited Liab	ility Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the p	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
The Sports Informer LLC 4000 Southwest 37th Boulevard Apt. 1123 Gainesville, FL 32608 ARTICLE III - Registered Agent, Registere (The Limited Liability Company cannot serve as its own Registers business entity with an active Florida registration.) The name and the Florida street address of the Adam Gordon Name	registered agent are:
4000 Southwest 37th	
	ddress (P.O. Box <u>NOT</u> acceptable)
Gainesville	_{FL} 32608
City, S	State, and Zip
liability company at the place designated in	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ity. 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.

(CONTINUED)

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:	•	FLA	2011 JAN
MGRM?	Adom Cordon	* * * * * * * * * * * * * * * * * * *	源第	
MGKW.	Adam Gordon 4000 SW 37th Boulevard Apt.	1122	177 m	
	Gainesville, FL 32608	1123	- T]	
	Garlesville, 1 E 32000		45 Ards	− ⇔
MGRM	Ross Romero			1
	21706 Wessex Way		·	_
	Boca Raton, FL 33486			
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·				_
<u>}</u>				
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(Use attachment if necessary)				
ARTICLE V: Effective date, if other than the (If an effective date is listed, the date must be to or 90 days after the date of filing.)				
REQUIRED SIGNATURE:				
adam	R. Brdan			
	per or an authorized representative o	f a men	nber.	
(In accordance with section 60 constitutes an affirmation und I am aware that any false info constitutes a third degree, felor	08.408(3), Florida Statutes, the execution of the penalties of perjury that the facts remation submitted in a document to the provided for in s.817.155, F.S.)	on of thi	s document herein are tru	e.
Adam R. Gor				
Ţ ,	yped or printed name of signee	1	-	

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)