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J. SAULSBERRY EXAMINER

MAR 0 9 2011

## **COVER LETTER**

	on Section f Corporations	;	•		
SUBJECT: Spo	orts Vision Software,	L.L.C.			
	Name of Limited	l Liability Company			
The enclosed Articl	es of Organization and fee(s) are su	ubmitted for filing.			
Please return all cor	respondence concerning this matte	r to the following:			
Salvato	ore Perconti				
	ľ	Name of Person			
Sports	Vision Software, L.L			<del></del>	
	J	Firm/Company			
8950 9	th Street North, Suite	200			4,
		Address	ĵ	201 TASI	
St. Peter	sburg, FL 33702		<u>'</u>		à
	·	State and Zip Code		ASS -	•
sal@per	Conti.com  F-mail address: (to be used for	future annual report notification)			
For further informat	ion concerning this matter, please of	•		2011 MAR -7 AM 11: 42 SECRETARY OF STATE TAIL AMASSEE, FLORID	1
Salvatore Per	conti	at (727 ) 576-7727		<b>5</b> 元	
N	ame of Person	Area Code & Daytime Tele	phone Number		
Enclosed is a chec	k 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 Certificate of Certified Copy (additional copy	Status & y	
	Mailing Address Registration Section Division of Corporations	Street/Courier Address Registration Section Division of Corporations	3		

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

# ARTICLES OF ORGANIZATION FOR

SPORTS VISION SOFTWARE, LLC.

A Florida Limited Liability Company

The undersigned natural person(s) of the age of eighteen years or more, acting as organizers of a limited liability company under the State of Florida Limited Liability Company Act, adopt(s) the following Articles of Organization for such a limited liability company.

#### **ARTICLE I**

#### Name

The name of the limited liability company is Sports Vision Software, LLC ("company")

### **ARTICLE II**

#### Address

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

#### Principal Office Address:

8950 9th Street N., Suite 200 St. Petersburg, FL 33702

## Mailing Address:

8950 9th Street N., Suite 200 St. Petersburg, FL 33702

## **ARTICLE III**

Registered Agent, Registered Office, and Registered Agent's Sign

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

Tara Scott-Metellus 8950 9th St. North, Suite 204 St. Petersburg, FL 33702

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..

Tara Scott-Metellus

# ARTICLES OF ORGANIZATION FOR

SPORTS VISION SOFTWARE, LLC.

A Florida Limited Liability Company

# ARTICLE IV Managing Members or Members

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

<u>Title:</u> "MGR"= Manager "MGRM"= Managing Member-	Name and Address:
MGR	Salvatore Perconti 8950 9th St. North, Suite 200 St. Petersburg, FL 33702
MGRM	Dorothy Perconti 8950 9th St. North, Suite 200 St. Petersburg, FL 33702

**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.)

Salvatore Perconti

Typed or printed name of signee