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PICK-UP WAIT MAIL
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A. LUNT

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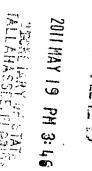
EXAMINER

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COVER LETTER

TO:

Registration Section

Division of Corp	porations						
SUBJECT: MIKE	JARVIS TEAM C	AMP. LLC					
SUBJECT:	Name of Limited			<u> </u>			
The enclosed Articles of 0	Organization and fee(s) are su	ıbmitted for filin	g. `				
Please return all correspon	ndence concerning this matter	r to the following	g:				
Peter Fran	nk Gash						
	h	lame of Person					
MIKE JAR	VIS TEAM CAM	P, LLC					
	J	Firm/Company					
777 Glade	s Road - Florida <i>A</i>	Atlantic Un	iversity A	rena	(-1 (v) (-2)	201	
		Address			30 - 36 30 - 36		rter
Boca Raton,	, Florida 33431				SSA	7 19	1
	City/	State and Zip Cod	e		-11 Las		
pgash@fau.e	edu E-mail address: (to be used for	· Cuture annual ron	art matification)		<u></u>	<u> </u>	7
For further information co	oncerning this matter, please of	-	on nonneadon)			e v	
Peter Frank Gash		_{at (} 561	, 558-7518				
Name of			e & Daytime Tele	phone Number			
Enclosed 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 F Certificate Certified C (additional c	of Statu Copy	ıs &	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrat Division Clifton B 2661 Exe	ourier Address ion Section of Corporations Building ecutive Center C see, FL 32301				

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:
MIKE JARVIS TEAM CAMP, 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:	Mailing Address:
777 Glades Road - FAU Arena	777 Glades Road - FAU Arena
Boca Raton, FL 33431	Boca Raton, FL 33431

ARTICLE III - Registered Agent, Registered Office, & Registered Agent (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an ind	t's Signatu	re ther
business entity with an active Florida registration.)	2121.13	
The name and the Florida street address of the registered agent are:	FSS:	9
Michael D. Jarvis II	ا الله المارية والمارية	7
Name	2 2	en
5463 Enclave Crossing	- 5.7	45
Florida street address (P.O. Box NOT acceptable)		
Delray Beach a. 33484		

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..

City, State, and Zip

Madaul January (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:

<u>Title:</u> "MGR" = Manager	Name and Address:	
"MGRM" = Managi	ing Member	
MGR	Peter Frank Gash	
	22504 Gables Boca Place	
	Boca Raton, FL 33431	, , , , , , , , , , , , , , , , , , ,
MGRM	Jorge Sanz	The state of the s
·	5650 Pacific Boulevard, Apt. 1101	(3) To 1
	Boca Raton, FL 33433	- FA
	<u></u>	*** ,
(Use attachment if n	necessary)	
•	• /	
ARTICLE V: Effective date	e, if other than the date of filing:	(OPTIONAL)
(If an effective date is listed	l, the date must be specific and cannot be more than f	ive business days prior
to or 90 days after the date	of filing.)	
REQUIRED SIGN	ATURE!	
	11/.4 1//	
	WARRE	

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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Peter Frank Gash

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)