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J. BRYAN
OCT 1 1 2012
EXAMINER

COVER LETTER

TO: Registration S Division of Co				
Four2O	ne Sports, LLC			
	Name of Limited	Liability Compa	iny	
The enclosed Articles o	f Organization and fee(s) are su	ubmitted for filing	3.	
Please return all corresp	ondence concerning this matte	r to the following	;	
Todd A. Han	cock			
	1	Name of Person		
				4. 3
3010 Elizab		Firm/Company		TOCT
Miami, FL 33	133	Address		O H O H
todd@four2o	ne.com	State and Zip Code		黄
For further information	E-mail address: (to be used for concerning this matter, please of	·	rt notification)	
Todd A. Hancock	·	305	733-8537	
Name	of Person	at (& Daytime Telep	hone Number
Enclosed is a check fo	r the following amount:			
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filin Certified Cop (additional copy	ру	\$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	Registration of Clifton Biogeon 2661 Exe	cutive Center Ci ee, FL 32301	rcle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
Four2One Sports, LLC	
(Must end with the words "Limited Liability Company, the abbreviate	pal office of the Limited Liability Company is
ARTICLE II - Address:	
The mailing address and street address of the principal	pal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
3010 Elizabeth St	(Same)
M. AMI, FL 23/33	
ARTICLE III - Registered Agent, Registered Of (The Limited Liability Company cannot serve as its own Registered business entity with an active Florida registration.) The name and the Florida street address of the region	Agent. You must designate an individual or another
The name and the Florida street address of the regis $\frac{To d d A}{Na}$	Hancock ame
3010 5U7 Florida street address (P.0	29 both St.
<u>Mìanu</u> City, Sta	FL 33/33 Ite, and Zip
	ot service of process for the above stated limited liability hereby accept the appointment as registered agent and ly 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

<u>Title:</u>	Name and Address:
"MGR" = Manager	
"MGRM" = Managing	y Member
1.16-10	State Land
MG	Steve Logan
, ,	55 Thompson St. Apt 4D New York, NY 10012
_	New York, IN F TOO 12
MAGR	بع المنظمة Jerome Schoen
- 	2408 Fox Meadow Lane
	Northfield, II 60093
1100	
MAK	Fernando Migliassi
	3109 Grand Avenue
•	Miami, FI 33133
-	
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777	
(Use attachment if nec	cessary)
	·
ICLE V. Effective dat	a if other than the data of films:
ICLE V: Effective date	te, if other than the date of filing:
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