# L13000 114066

| (Requestor's Name)                      |
|---|
| (Address)                               |
| (Address)                               |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Document Number)                       |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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08/12/13--01058--013 \*\*130.00

Effective Date 8/15/13

SECRETARY OF STATE ON OF CORPORATIONS

AUG 1 3 2013 T. HAMPTON

### **COVER LETTER**

|                 | istration Section<br>ision of Corporations   |
|-----------------|--|
| SUBJECT:        | Skybox Sports LLC  |
|                 | Name of Limited Liability Company  |
| The enclosed    | Articles of Organization and fee(s) are submitted for filing.  |
| Please return   | all correspondence concerning this matter to the following:  |
| Ke              | n Arena, EA  |
|                 | Name of Person   |
| Ke              | n Arena Accounting & Tax Service   |
|                 | Firm/Company   |
| 91              | 2 Lithia Pinecrest Road  |
|                 | Address  |
| Bra             | andon, FL 33511-6121   |
|                 | City/State and Zip Code  |
| joe             | @watchdepotflorida.net  E-mail address: (to be used for future annual report notification)   |
| D 6 4 4         |  |
| For further in  | formation concerning this matter, please call:   |
| Ken Arer        | na at (813 ) 341-2501  |
| <del>-</del>    | Name of Person at (813) 341-2501  Area Code & Daytime Telephone Number   |
| Enclosed is     | a check for the following amount:  |
| ]\$125.00 Filir | rag Fee   \$130.00 Filing Fee &   Certificate of Status  \$155.00 Filing Fee &   Certified Copy   (additional copy is enclosed)  Certified Copy   (additional copy is enclosed)  Certified Copy   (additional copy is enclosed)  |
|                 | Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301 |

## Effective Date 8 15 13

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| Claubou  | Sports II C  |
|--|--|
|  | Sports LLC nited Liability Company, "L.L.C.," or "LLC.")                 |
| ·  | inted Elabority Company, Elect., or Elect.)                              |
| ARTICLE II - Address: The mailing address and street address | of the principal office of the Limited Liability Company is:             |
| Principal Office Address:                                    | Mailing Address:   |
| 7217 N. Serenoa Drive  | 7217 N. Serenoa Drive  |
| Sarasota, FL 34241-9273                                      | Sarasota, FL 34241-9273  |
| The name and the Florida street addres                       |  |
| Ken Arena, EA  | Name   |
|  | inecrest Road  |
| 912 Lithia P   | inecrest Road  a street address (P.O. Box NOT acceptable)                |
| 912 Lithia P   | inecrest Road  a street address (P.O. Box NOT acceptable)  FL 33511-6121 |
| 912 Lithia P   | inecrest Road  a street address (P.O. Box NOT acceptable)                |

(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:

| Use attachment if necessary)  E V: Effective date, if other than the date of filing and days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a member or an author (In accordance with section 608.408(3), Flori  | and Address:                                      |
|---|---|
| Use attachment if necessary)  LE V: Effective date, if other than the date of filinective date is listed, the date must be specific and lays after the date of filing.)  REQUIRED SIGNATURE:  Signature of a member or an author (In accordance with section 608.408(3), Flori  |   |
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| REQUIRED SIGNATURE:  Signature of a member or an author (In accordance with section 608.408(3), Flori   | g: August 15, 2013 . (OPTIONAL                    |
| Signature of a member or an author (In accordance with section 608.408(3), Flori  | d cannot be more than five business days          |
| Signature of a member or an author (In accordance with section 608.408(3), Flori  |   |
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| (In accordance with section 608.408(3), Flori   | rized representative of a member.                 |
| (in accordance with section 608.408(3), Flori   |   |
| constitutes an aftirmation under the penalties  | of perjury that the facts stated herein are true. |
| I am aware that any false information submit  | ed in a document to the Department of State       |
| constitutes a third degree felony as provided   | ehmone  |

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)

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Typed or printed name of signee