

214000044132

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

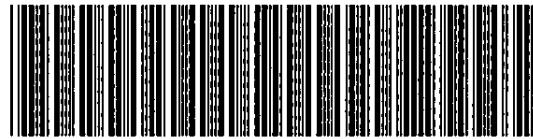
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14 MAR 24 PM 3:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2014 MAR 25 10:52

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SPRAGGS SPORTS
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:

TIFFANY Spraggs
Name of Person

SPRAGGS SPORTS
Firm/Company

194 Peppergrass Run, Royal Palm Beach, FL 33411
Address

Royal Palm Beach, FL 33411
City/State and Zip Code

SpraggsSports@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TIFFANY Spraggs at 561 267-9458
Name of Person Area Code Daytime Telephone Number

Enclosed is a check 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 Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 20, 2014

TIFFANY SPRAGGS
684 PEPPERGRASS RUN
ROYAL PALM BEACH, FL 33411

SUBJECT: SPRAGGS SPORTS, LLC
Ref. Number: W14000011230

We have received your document for SPRAGGS SPORTS, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tim Burch
Regulatory Specialist II

Letter Number: 814A00003862

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SpraggsSports, 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:

684 Peppergrass Run
Royal Palm Beach, FL
33411

684 Peppergrass Run
Royal Palm Beach, FL
33411

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Comitaw Thomas
Name

1088 Grandview Circle
Florida street address (P.O. Box NOT acceptable)

Royal Palm Beach FL 33411
City Zip

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TALLAHASSEE, FLORIDA

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 605, F.S..

Comitaw Thomas
Registered Agent's Signature (REQUIRED)

(CONTINUED)

Comitaw

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR / *executive*

Name and Address:

Tiffany Spraggs
684 Peppergrass Run
Royal Palm Beach, FL33411

AMBR

Yvette Roberts
684 Peppergrass Run
Royal Palm Beach, FL 33411

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TALLAHASSEE FLORIDA

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

Yvette Roberts

Signature of a member or an authorized representative of a member.
(In accordance with section 605.0203 (1) (b), 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.)

YVETTE ROBERTS
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)