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T. BROWN

## **COVER LETTER**

то:	Registration Section Division of Corporations
SUBJI	ECT: Sport 360 Media LLC  Name of Limited Liability Company
The en	nclosed Articles of Organization and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Keyvan Heydari Name of Person
	Firm/Company
	7460 SW 70 Ter Address
	Miami, FL 33143  City/State and Zip Code
منـ	nfo@supersportmedia.com E-mail address: (to be used for future annual report notification)
For fur	rther information concerning this matter, please call:
K.Hev	vdari at (305) 776-2100  Name of Person Area Code Daytime Telephone Number
Enclos	sed is a check for the following amount:
□ \$125.0	Oo Filing Fee  \( \sum \$\sum \text{\$\sum \text{\$\sin \text{\$

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

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMP. ARTICLE I - Name: The name of the Limited Liability Company is: Sport 360 Media 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: 7460 SW 70 Terrace Miami, FL 33143 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: Keyvan Heydari Name 7460 SW 70 Terrace

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..

FL 33143

Zip

Registered Agent's Signature (REQUIRED)

Florida street address (P.O. Box NOT acceptable)

City

Miami

(CONTINUED)

Page 1 of 2

	= Authorized Member	Name and Address:
	Manager	
MGR		K.Heydari 7460 SW 70 Terrace
		Miami, FL 33143
4400		
AMBR		Obi Okehi
		639 Hemlock St Macon, GA 31201
AMRO		
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(Use attac	chment if necessary)	<del></del>
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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)