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2015 MAY 18 PM 6:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALLY
EXAMINER
MAY 20 2015

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Pro Pools of Sarasota, 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:

Christopher J. Mercadante
Name of Person

Firm/Company

PO Box 20333
Address

Sarasota, FL 34276
City/State and Zip Code

D. Chaffin34@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Danielle Chaffin at (941) 961-0823
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 Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Pro Pools of Sarasota, 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:

4400 Baycedar lane
Sarasota, FL 34241

Mailing Address:

PO BOX 20333
Sarasota, FL 34276

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:

Danielle R. Chaffin
Name
4400 Baycedar lane
Florida street address (P.O. Box **NOT** acceptable)
Sarasota, FL 34241
City State Zip

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..

Danielle Chaffin
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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2015 MAY 18 PM 6:02
CLERK OF CIRCUIT
JAIL, HALLS, ETC. F. FLORIDA

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

AMBR

Name and Address:

Christopher J. Mercadante
4400 Bay Cedar Lane
Sarasota, FL 34241

Danielle R. Chaffin
4400 Bay Cedar Lane
Sarasota, FL 34241

(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.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

Christopher J. Mercadante

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.)

Christopher Mercadante

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)