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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6381

From: Elaine Jordan PLEASE FAX CONFIRMATION TO 407-244-5690

Account Name : GRAYROBINSON, P.A. - ORLANDO
Account Number : I20010000078
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FLORIDA LIMITED LIABILITY CO.
Orlando Soccer Development Company, LLC

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Help

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I
Name

The name of this Limited Liability Company is:

Orlando Soccer Development Company, LLC

ARTICLE II
Address

The initial mailing address and street address of the principal office of this Limited Liability Company is:

618 E. South Street
Suite 510
Orlando, FL 32801

ARTICLE III
Management

This Limited Liability Company is to be managed by one or more managers and is, therefore, a "manager-managed" limited liability company.

ARTICLE IV
Initial Board of Managers

This Limited Liability Company shall have three (3) managers initially. The number of managers may be either increased or decreased from time to time in accordance with the Operating Agreement of this Limited Liability Company, but shall never be less than one (1).

The names and addresses of the initial managers of this Limited Liability Company are as follows:

<u>Name</u>	<u>Street Address</u>
Philip N. Rawlins	618 E. South Street, Suite 510 Orlando, FL 32801
Alexandre Leitao	618 E. South Street, Suite 510 Orlando, FL 32801
Flavio Augusto da Silva	618 E. South Street, Suite 510 Orlando, FL 32801

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CLERK OF DISTRICT COURT
MIDDLE DISTRICT OF FLORIDA

ARTICLE V
Registered Agent, Registered Office & Registered Agent's Signature

The name and the Florida street address of the Registered Agent of this Limited Liability Company is:

Philip N. Rawlins
618 E. South Street, Suite 510
Orlando, FL 32801

Having been named as registered agent to accept service of process for this limited liability company at the place so designated in these Articles of Organization, the undersigned hereby accepts this appointment and agrees to act in this capacity. The undersigned agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties and is familiar with and accepts the obligations of the undersigned's position as registered agent, as provided for in Chapter 605, Florida Statutes.


REGISTERED AGENT'S SIGNATURE

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 in Section 817.153, Florida Statutes.


AUTHORIZED REPRESENTATIVE'S SIGNATURE

Philip N. Rawlins, Authorized Representative
Type or printed name of signee