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COVER LETTER

| Division of Corporations |
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| SUBJECT: BASKetbal Development 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: |
| Mhu Nguyer Name of Person |
| Name of Person |
| Brikethall Development, LLC. Firm/Company |
| 2772 YAMATO RD Suite 106 BD 226 |
| Bora Raton F1 33431 City/State and Zip Code Coachhul Gmail E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| Namp of Person Area Code Daytime Telephone Number |
| Enclosed is a check for the following amount: |
| \$125.00 Filing Fee Certificate of Status Status Certificate of Status (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 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:

FILED

| The name of the Limited Liability Company is. | 16 JUL -6 PM 5: 55 |
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| Basketball Development .LLC. | SECRE FARY OF STATE |
| (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC | :") TALLAHASSEE FEORIDA |
| ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company | is: |
| Principal Office Address: Mailing | Address: |
| 1999 NW 41th Ave APT A 222 Yamaton BOCA PLATON FL 33432 BOX 226 BOCA BAGON | FI 33431 |
| ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate another business entity with an active Florida registration.) | an individual or |
| The name and the Florida street address of the registered agent are: | |
| Florida street address (P.O. Box NOT acceptable) | _ |
| Boca Raton FI 33432 City State Zip | _ |
| Having been named as registered agent and to accept service of process for the above stated limited place designated in this certificate, I hereby accept the appointment as registered agent and agree of further agree to comply with the provisions of all statutes relating to the proper and complete perform familiar with and accept the obligations of my position as registered agent as provided for in Complete Registered Agent's Signature (REQUIRED) | o act in this capacity. I rmance of my duties, and I |
| (CONTINUED) | |
| Page 1 of 2 | |

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| of a member or an authorized representative is executed in accordance with section 605.0203 | |
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