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(Re	questor's Name)				
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COVER LETTER

Di	vision of Corporations
SUBJECT:	Rare Sports Institute, LLC
SOBJECT.	Name of Limited Liability Company
The enclose	ed Articles of Organization and fee(s) are submitted for filing.
Please retur	n all correspondence concerning this matter to the following:
	Gregory Williams-Evans
	Name of Person
	Rare Sports Institute, LLC
	Firm/Company
	100 Valencia Cir
	Address
	Saint Petersburg, FL 33716
	City/State and Zip Code
<u>.</u>	E-mail address: (to be used for future annual report notification)
For further in	nformation concerning this matter, please call:
	Gregory Williams-Evans 772 528-4230
	Name of Person Area Code Daytime Telephone Number
Enclosed is	a check for the following amount:
]\$125.00 Fi	ling Fee \$\ \text{S130.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{\$\subseteq} \ \ \text{S160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \text{\$\text{Certified Copy (additional copy is enclosed)}} \text{\$\text{\$\text{Certified Copy (additional copy is enclosed)}}}

Mailing Address

Registration Section

TO:

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICL	E I - Name:			
The name	of the Limited Liability	y Company is:		
	Rare Sports Institute,	LLC		
		with the words "Limited I	Liability Company	y, "L.L.C.," or "LLC.")
	E II - Address:			
i ne maiii	ng address and street ac	ldress of the principal of	ice of the Limited	Liability Company is:
	Principal Office Address:			Mailing Address:
	100 Valencia Cir		100	Valencia Cir
	Saint Petersburg, FL	33716	Sair	nt Petersburg, FL 33716
				
(The Limitanother b	ted Liability Company usiness entity with an a	ctive Florida registration	Registered Agent.	nt's Signature: You must designate an individual or
The name	and the Florida street a	address of the registered	agent are:	
		Gregory Williams-Eva	ans	
			Name	
		100 Valencia Cir		
		Florida street address	(P.O. Box NOT 8	acceptable)
		Saint Petersburg	Florida	33716
		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.,

(CONTINUED)

Green William - Every Registered Agent's Signature (REQUIRED)

Page 1 of 2

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"AMBR" = Au	Name and Address: horized Member		
"MGR" = Mana			
"MGR"	Gregory Williams-Evans		
	100 Valencia Cir		
	Saint Petersburg, FL 3371	6	
"MGR"	Frank Bernard		
	5511 Walters Circle		
	Fayetteville, Arkansas 72	704	
"AMBR"	Sherman LaDet		
	3220 Meanley Dr		
	Chesapeake, VA 23323	- 18° (80) (10° (80)	
(Use attachmer	t if necessary)		
.EV: Effective	date, if other than the date of filing:	(OPTIONAL)	
ective date is lig of filing.)	ted, the date must be specific and cannot be more than five	business days prior to or 90) da
f the date inserte	d in this block does not meet the applicable statutory filing redate on the Department of State's records.	quirements, this date will no	•
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The name and address of each person authorized to manage and control the Limited Liability Company:

ARTICLE IV-