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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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

From: Account Name : MORRIS A. LECOMPTE, P.A.
Account Number : 072100000461
Phone : (727) 896-1000
Fax Number : (727) 896-1009

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: hmballon.tennis@gmail.com

FLORIDA LIMITED LIABILITY CO.
BallOn Tennis LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

FILED
18 APR 18 AM 9:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
2008 APR 18 PM 4:41
DIVISION OF CORPORATIONS
COMMERCIAL
TRADING SERVICES

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BallOn Tennis 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:

Hugo Ballon
Name of Person

BallOn Tennis LLC
Firm/Company

7419 3rd Avenue North
Address

Saint Petersburg, FL 33710
City/State and Zip Code

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

For further information concerning this matter, please call:

Hugo Ballon at (571) 245-9301
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|---|---|
| <input checked="" type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

BallOn Tennis 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:7419 3rd Avenue North
Saint Petersburg, FL 337107419 3rd Avenue North
Saint Petersburg, FL 33710

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:

Hugo Ballon

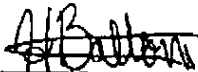
Name

7419 3rd Avenue NorthFlorida street address (P.O. Box NOT acceptable)Saint PetersburgFL 33710

City

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.



Registered Agent's Signature (REQUIRED)

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ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGRName and Address:Hugo Ballon7419 3rd Avenue NorthSaint Petersburg, FL 33710SECRETARY OF STATE
TALLAHASSEE, FLORIDA

18 APR 18 AM 9:58

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(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.)

ARTICLE VI: Other provisions, if any.

See attached pageREQUIRED SIGNATURE:

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.)

Hugo Ballon

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)

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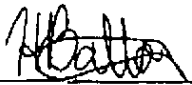
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BallOn Tennis LLC
7419 3rd Avenue North
Saint Petersburg, FL

INITIAL LIST OF MEMBERS

The following named person(s) shall constitute the initial members of BallOn Tennis LLC:

Hugo Ballon
7419 3rd Avenue North
Saint Petersburg, FL 33710



Hugo Ballon, Organizer

04/17/2018
Date

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