

**C9000186S9A**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 : CORPORATE CREATIONS INTERNATIONAL INC.  
Account Number : 110432003053  
Phone : (561)694-8107  
Fax Number : (561)694-1639

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

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FLORIDA LIMITED LIABILITY CO.  
US Club Sports Group, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

2019 AUG -1 AM 10:56

SECRETARY OF STATE  
TALLAHASSEE, FL

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850-817-8381

8/1/2019 9:14:08 AM PAGE 1/001 Fax Server



August 1, 2019

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

CORPORATE CREATIONS

SUBJECT: US CLUB SPORTS GROUP, LLC  
REF: W19000069545

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document is illegible and not acceptable for imaging.

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KYLE D BRUMBLEY  
Regulatory Specialist II  
New Filing Section

FAX Aud. #: H19000226452  
Letter Number: 119A00015720

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

US Club Sports Group, LLC

(Must contain 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:

1110 S.E. 4th Street  
Fort Lauderdale, FL 33301

Mailing Address:

1110 S.E. 4th Street  
Fort Lauderdale, FL 33301

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:

Corporate Creations Network Inc.  
Name

11380 Prosperity Farms Road #221E  
Florida street address (P.O. Box **NOT** acceptable)

<u>Palm Beach Gardens</u>	<u>Florida</u>	<u>33410</u>
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.



**Kristen Espinales, Special Secretary**

Registered Agent's Signature (REQUIRED)

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TALLAHASSEE, FL

**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

**Name and Address:**

Stewart Tetreault

1110 S.E. 4th Street

Port Lauderdale, FL 33301

AMBR

Demrie Henry

9207 Alta Oaks Drive

Dallas, TX 75243

AMBR

Donald Cabalan

2800 Jordan Grove

West Des Moines, IA 50265

(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:**

  
\_\_\_\_\_  
Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.  
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.

Morris W. Banks, Authorized Representative

\_\_\_\_\_  
Typed or printed name of signer

**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)