

1/27/2020

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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: Account Name : COGENCY GLOBAL, INC.
Account Number : I20000000088
Phone : (800) 221-0102
Fax Number : (800) 944-6607

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FLORIDA LIMITED LIABILITY CO.

INVEST SPORT LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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ARTICLES OF ORGANIZATION
OF
INVEST SPORT LLC

ARTICLE I: - Name

The name of the Limited Liability Company is INVEST SPORT LLC

ARTICLE II: - Address

The mailing address and street address of the principal office of the Limited Liability Company

5966 S Dixie Hwy
Unit 300
South Miami, FL 33143

ARTICLE III: - Registered Agent, Registered Office, & Registered Agent's Signature

The name and the Florida street address of the registered agent are:

Cogency Global Inc.
115 North Calhoun Street, Suite 4
Tallahassee, Florida 32301


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.

COGENCY GLOBAL INC., as Registered Agent

By: _____

Name: _____

Title: _____


ERIC B. HOOD
ASSISTANT SECRETARY

ARTICLE IV: - Management

The name and address of each person authorized to manage and control the limited liability company is as follows:

Title:

Name and Address:

AMBR

Marco Gandelman
5950 SW 113 St
Pinecrest - FL 33156

AMBR

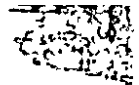
Eduardo Acordi
5941 SW 96 St
Pinecrest - FL 33156

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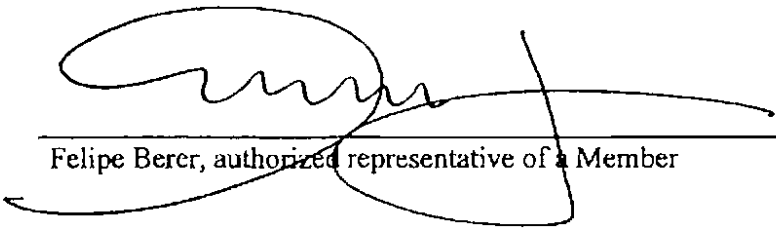
AMBR

Tiago Pinto
7721 SW 53rd Ave
Miami – FL 33143

* * * * *



IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization on January 27, 2020.



Felipe Berer, 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 Section 817.155, Florida Statutes.)

Felipe Berer
Typed or printed name of signer

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