

L24000271575

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

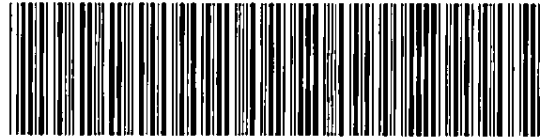
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

06/12/24

Office Use Only



800429321398

S. CHAYHAI
JUN 17 2024

05/08/24--01025--004 **125.00

●
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

CABLE AND/OR VIDEO
FRANCHISING
2024 JUN 12 PM 4:50

FILED

T.J.H
5/20/24



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 20, 2024

WILLIAM BORI
3 SUMMER ROAD
FLEMINGTON, NJ 08822 US

SUBJECT: LOCATIONS SPORTS BRANDS FLORIDA, LLC
Ref. Number: W24000077258

We have received your document for LOCATIONS SPORTS BRANDS FLORIDA, LLC and check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tabitha J Howell
Regulatory Specialist II

Letter Number: 524A00011013

RECEIVED
2024 JUN 12 PM 4:37
DIVISION OF CORPORATIONS
SPECIAL

COVER LETTER

**TO: New Filing Section
Division of Corporations**

SUBJECT: LOCATIONS SPORTS BRANDS FLORIDA, 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:

WILLIAM BORI

Name of Person

LOCATIONS HOLDING COMPANY INC

Firm/Company

3 SUMMER ROAD

Address

FLEMINGTON, NJ 08822

City/State and Zip Code

cheryl.jackson@lsb.team

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

William Bori 908 616-0529
at ()
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

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

Street Address

New Filing Section Division
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

LOCATIONS SPORTS BRANDS FLORIDA, 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:

LOCATIONS SPORTS BRANDS FLORIDA LL
1 EVERBANK STADIUM DRIVE
JACKSONVILLE, FL 32202

Mailing Address:

LOCATIONS SPORTS BRANDS FLORID
3 SUMMER ROAD
FLEMINGTON, NJ 08822

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:

William Bori

Name

1 EverBank Stadium Drive

Florida street address (P.O. Box **NOT** acceptable)

Jacksonville

FL

32202

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

FILED
2024 JUN 12 PM 4:52
CABLE AND/OR VIDEO
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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:

WILLIAM BORI
137 PROMONTORY COURT
SIX MILE, SC 29682

FILED
2024 JUN 12 PM 4:55
CABLE AND/OR VIDEO
FRANCHISING
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

(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.

WILLIAM BORI

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent