# M 140000002854

(Red	questor's Name)	
(Add	dress)	
<b>/</b> A.1	d	
(Add	dress)	
(City	y/State/Zip/Phone	÷#)
PICK-UP	· WAIT	MAIL MAIL
(Bus	siness Entity Nam	ne)
		<u>-</u> :-
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer:	
	APR 2 8 Z	,
	A. LUN	IT

Office Use Only



000258647780

1715 19 ANNIGUOTO Fig. W. CZ XJA HIOZ

DEPARTMENT OF STATE

### FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

1)	Λ	•	ľ	E.	*

4/24/14

NAME:

D1 SPORTS TRAINING AND THERAPY OF TAMPA, LLC

TYPE OF FILING: APPLICATION

COST:

125.00 + 777.50 = 902.50 (Penalty)

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

#### **COVER LETTER**

SUBJECT: _	Na	une of Limited Liability Comp	my		
The enclosed * Existence, and	'Application by Foreign Limited Lia check are submitted to register the	ability Company for Author above referenced foreign li	ization to Tr wited liabili	ransact Business in Fl ty company to transac	lorida," Certificate o et business in Florid
Please return a	Il correspondence concerning this n	natter to the following:			
	Michael Abramson				2014 APR
		Name of Person	<del></del>		P.
	D1 Sports Holdings, LLC				25 ARY (SS)
		Firm/Company			THE T
	7115 S Springs Drive				W 9: 33
		Address			7000
	Franklin, TN 37067				
		City/State and Zip Code			
	Mike@D1SportsTraining	.com			
	E-mail addres	ss: (to be used for future annua	report notifi	cation)	
For further inf	ormation concerning this matter, ple	case call:			
Mic	hael Abramson	201 at (		2158	
	Name of Contact Person	Area Co	de D	aytime Telephone Num	iber
Divis Regis P.O.	LING ADDRESS: ion of Corporations stration Section Box 6327 hassee, FL 32314	STREET ADDRESS: Division of Corporation Registration Section Clifton Building 2661 Executive Center Tallahassee, FL 32301			

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605,0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. D1 Sports Training and Therapy of Tar	npa, LLC					_
(Name of Foreign Limited Liability Company:	must include	"Limited Liability C	Company," "L.L.C.,"	or "LLC.")		
(If name unavailable, enter alternate name adopted for the publicability Company," "L.L.C." or "LLC.")			lorida. The alternate	name must incl	ude "Lin	 nited
2. Tennessee	3	45-1200541				
(Jurisdiction under the law of which foreign limited liabili company is organized)	ty	•	(FEI number, if appli	cable)		•
January 2, 2012						
(Date first transacted b (See sections 605.0904 &	usiness in Flo . 605,0905, F.	orida, if prior to regis S. to determine pena	stration.) Ity liability)	inest Descrip	201	•
5. 6918 Gunn Highway, Tampa, FL 3362	.5			- C.	2014 AP	-51
				TASS	? 25	
		Principal Office)		نىن ئىرى	至	- I amora
6. 7115 S Springs Drive, Franklin, TN 370	)67 ————			70	J.	- -
					ယ္	
	(Mailing	Address)		**************************************		-
7. The name, title or capacity and address of	the persor	n(s) who has/ha	ve authority to r	nanage is/ai	·e:	
Will Bartholomew, as CEO D1 Sports Hol	ldings, LL	.C				
7115 S Springs Drive, Franklin, TN 37067	7					_
8. Attached is an original certificate of exister having custody of records in the jurisdiction unacceptable. If the certificate is in a foreign lan must be submitted)	inder the language, a tr	aw of which it is	s organized. (A	photocopy	is not	
Signat (In accordance with section 605.0203, F.S., the execution of this obtain aware that any false information submitted in a dicument to the  Michael Abramson	cument constitu		er the penalties of perju			
	r printed n	ame of signee		<del></del>		

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of	of the Limited Liability C	Company is:		
D1 Sports Tr	aining and Therapy of	Tampa, LLC		
If unavailable,	the alternate to be used i	in the state of Florida is:		
2. The name a	nd the Florida street add	ress of the registered agent and office are:	ZOIL APR	
	Registered Agent So	olutions, Inc.	25 I	4
		(Name)		ζ_
	155 Office Plaza Dr.	, Suite A	\$ 23 S	
	Florida Stree	et Address (P.O. Box NOT ACCEPTABLE)	<del>-</del> ~•	
	Tallahassee	<sub>FL</sub> 32301		
		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, Florida Statutes.

Jolyn Wright Asst. Secretory
(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)



#### STATE OF TENNESSEE Tre Hargett, Secretary of State

Division of Business Services William R. Snodgrass Tower 312 Rosa L. Parks AVE, 6th FL Nashville, TN 37243-1102

MICHAEL ABRAMSON

MICHAEL ABRAMSON 7115 S SPRINGS DRIVE FRANKLIN, TN 37067

Request Type: Certificate of Existence/Authorization

Request #.

0126528

Issuance Date: 04/23/2014

Copies Requested:

**Document Receipt** 

Receipt #: 1482236

Filing Fee:

\$22.25

April 23, 2014

Payment-Credit Card - State Payment Center - CC #: 155926263

\$22.25

Regarding:

D1 SPORTS TRAINING AND THERAPY OF TAMPA, LLC

Filing Type:

Status:

Limited Liability Company - Domestic

Control #:

601227

Formation/Qualification Date: 04/24/2009

Date Formed:

04/24/2009

Active

Formation Locale: TENNESSEE

Duration Term:

Perpetual

Inactive Date:

Business County: WILLIAMSON COUNTY

CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

#### D1 SPORTS TRAINING AND THERAPY OF TAMPA, LLC

- \* is a Limited Liability Company duly formed under the law of this State with a date of incorporation and duration as given above;
- \* has paid all fees, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business;
- \* has filed the most recent annual report required with this office;
- \* has appointed a registered agent and registered office in this State;
- \* has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Secretary of State

Processed By: Cert Web User

Verification #: 006972531