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		WALK IN				
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#### 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:

Sports Reference, LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

Pennsylvania		7			
Unisdiction under the law of which foreign limited liability company is organized)		3	(applicable)		
12/3/2007					
	(Date first transacted business in Florida, if prior to re (See sections 605 0904 & 605.0905, F.S. to determin	egistration ) repenalty liability			
6757 Greene Street, STE, 315			Greene Street, STE, 315		
		6			
Philadelphia, PA 19119		Philadelphia, PA 19119			
Name and streat address	s of Florida registered agent: (P.O. Box				 <b>28</b> 22 HAY
reame and <u>speet addres</u>	<u>s</u> of Horida registered agent. (1.3). Box	<u>NOT</u> accep	(10)(2)		
Name:	Registered Agents Inc.		_		16 N
Office Address:	7901 4th St. N. Ste. 300		_	, <sup>3</sup> 	AH 11: 2
	St. Petersburg			1	â
	(City)		(Zip code)		

Registered agent's acceptance:

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 application. 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

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8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity:	Name and Address:	<u>Title or Capacity:</u>	Name and Address:
⊡Manager	Name:	□Manager	Name: Sports Reference, Inc.
Member	Address: 10 Pumpkin Pine Rd.	Member	Address: 612 W Sedgwick St.
□Authorized	Natick, MA 01760	Authorized	Philadelphia, PA 19119
Person		Person	
□Other	Other	DOther	Other
□Manager	Name:	□Manager	Name:
Member	Address: 912 Jim Long St.	□Member	Address:
□Authorized	Monteagle, TN 37356	□Authorized	
Person		Person	
00ther	Other	⊡Other	[]Other
□Manager	Name:	□Manager	Name:
□Member	Address:	Member	Address:
□Authorized		□Authorized	
Person		Person	
□Other	Other	DOther	Other

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. 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.

Signature of an authorized person

Sean Forman

Typed or printed name of signee

### COMMONWEALTH OF PENNSYLVANIA

#### DEPARTMENT OF STATE

#### 05/12/2022

#### TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

#### I DO HEREBY CERTIFY THAT.

5 1

#### Sports Reference, LLC

is duly registered as a Pennsylvania Limited Liability Company under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTEMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written

Acting Secretary of the Commonwealth

Certification Number: TSC220512121428-1

Verify this certificate online at http://www.corporations.pa.gov/orders/verify