M25000006434

(Re	equestor's Name)	
(Ad	Idress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



500449922255

05/01/25--01018--005 **130.00

STATE PHID: 27

womblebonddickinson.com



April 30, 2025

Via FedEx to:

Florida Department of State Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 Nadia G. Aram 555 Fayetteville Street, Suite 1100 Raleigh, North Carolina 27601 Direct Dial: 919-755-2119 E-mail: nadia.aram@wbd-us.com

RE: Application by Foreign Limited Liability Company to Transact Business in Florida for TPL Franchise Systems, LLC

Dear Registration Section:

Attached please find the above -referenced application and a Certificate of Existence from the NC Secretary of State dated April 23, 2025 together with a check for \$130 (covering application fee (\$100), registered agent designation fee (\$25) and certificate of status fee (\$5)) payable to the Department for filing of this application with you.

Please remit the confirmation of filing/certificate of status to me. If you have any questions, please feel free to let me know. Note that this application is made as a predicate step in advance to the company being able to offer a franchise for sale in Florida following the separately required filing of a Franchise Exemption Application under the Sale of Business Opportunities Act with the Florida Department of Agriculture and Consumer Services.

We appreciate your assistance.

Thank you,

Nadia Aram

Womble Bond Dickinson (US) LLP

ce: Alec Allred, CEO and Manager TPL Franchise Systems, LLC



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached are the instructions to register a foreign limited liability company to transact business in Florida. The requirements are as follows:

Pursuant to s. 605.0902, Florida Statutes, the attached application must be completed in its entirety.

The foreign limited liability company must submit 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.

- The name of a limited liability company must be distinguishable on the records of the Florida Department of State. If the name of your limited liability company is not distinguishable on our records, you must adopt an alternative name to use in the state of Florida.
- The name of a limited liability company in the state of Florida must contain the words "Limited Liability Company," The abbreviation "L.L.C.," or the designation "LLC."

A preliminary search for name availability can be made on the Internet through the Division's records at www.sunbiz.org. Preliminary name searches and name reservations are no longer available from the Division of Corporations. You are responsible for any name infringement that may result from your name selection.

The fees to register are as follows:

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Important Information About the Requirement to File an Annual Report

All Foreign Limited Liability Companies must file an Annual Report yearly to maintain "active" status. The first report is due in the year following formation. The report must be filed electronically online between January 1st and May 1st. The fee for the annual report is \$138.75. After May 1st a \$400 late fee is added to the annual report filing fee. "Annual Report Reminder Notices" are sent to the e-mail address you provide us when you submit this document for filing. To file any time after January 1st, go to our website at www.sunbiz.org. There is no provision to waive the late fee. Be sure to file before May 1st.

A letter of acknowledgment will be issued free of charge upon registration. Please submit one check made payable to the Florida Department of State for the total amount of the filing fee and any optional certificate or copy.

A COVER letter should be submitted along with the application, certificate, and check. The mailing address and courier address are noted below.

Any further inquiries concerning this matter should be directed to the Registration Section by calling (850) 245-6051.

Mailing Address:

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

Street Address:

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

COVER LETTER

of ida.

.

TO:

TPL Franchise Systems, LLC	
	ne of Limited Liability Company
nclosed "Application by Foreign Limited Liability	Company for Authorization to Transact Business in Florida," referenced foreign limited liability company to transact busin
e return all correspondence concerning this matter	
Nadia Aram/Jill Hom	
	Name of Person
Womble Bond Dickinson	
	Firm/Company
555 Fayetteville Street, Suite 1100	
	Address
Raleigh, NC 27601	
C	City/State and Zip Code
aalired@theplayersleague.us and knel	lson@theplayersleague.us
E-mail address: (to be	e used for future annual report notification)
ther information concerning this matter, please cal	II:
Nadia Aram (Womble Bond Dickinson)	919 755-2119
Name of Contact Person	at ()
Mailing Address: Registration Section Division of Corporations	Street Address: Registration Section Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPA I \$125.00 Filing Fee \$130.00 Filing Fee	ARTMENT OF STATE

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:

ne unavailable, enter alternat	e name adopted for the purpose of transacting business in Flor	nda. The alternate name must include "Limited L.	ability Company," "L.L.C." or "	
forth Carolina		33-3417213		
(Jurisdiction under the law of	which foreign limited liability company is organized)	3. (FEI number, if applicable)		
Not applicable	(Date first transacted business in Florida, if prior to re (See sections 605,0904 & 605,0905, F.S. to determine	gistration.)		
208 West Second Stre	eet, Siler City, NC 27344	P.O. Box 1337, Ramscur, No. (Mailing Address)	C 27316	
		(Menting Address)		
				
lame and street addre	ss of Florida registered agent: (P.O. Box 1	NOT acceptable)		
lame and <u>street addre</u> Name:	ss of Florida registered agent: (P.O. Box 1 Corporation Service Company	NOT acceptable)	2025	
		NOT acceptable)	2025 HAY -	
Name:	Corporation Service Company	NOT acceptable) 32301	CSHAY - 1 PH 10: 2	

Danielle Ellenberger Danielle Ellenberger Asst. Secretary
(Registered agent's signature)

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: Title or Capacity: Name and Address: Alexander (Alec) Allred Name: Alexander (Alec) Allred Manager □ Manager Address: 208 West Second Street □Member □ Member Siler City, NC 27344 Siler City, NC 27344 ☐ Authorized ☐ Authorized Person Person ■Other_CEO □Other__ Other _____ Other____ Name: The Players League LLC ■ Manager □Manager Name: Address: 208 West Second Street **■**Member Address: ____ Siler City, NC 27344 \square Authorized ☐ Authorized Person Person □Other__ ☐Other____ Other____ □Other_____ □Manager □Manager Name: □Member Address: ____ □Member Address: ☐ Authorized ☐ Authorized Person Person Other____ Other □Other____ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed 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. Alexander Albred Alexander (Alec) Allred, Manager/CEO of TPL Franchise Systems, LLC

Typed or printed name of signee



NORTH CAROLINA Department of the Secretary of State

CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

TPL FRANCHISE SYSTEMS, LLC

is a limited liability company duly formed, and existing under the laws of the State of North Carolina, having been formed on 31st day of January, 2025

I FURTHER certify that, as of the date of this certificate, (i) the said limited liability company is not dissolved under the terms of its articles of organization, (ii) the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina, (iii) that said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act, (iv) that this office has not filed any decree of judicial dissolution, articles of dissolution, articles of merger, or articles of conversion for said limited liability company.





Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 23rd day of April, 2025.

Elaine I Marshall

Secretary of State