Division of Corporations Electronic Filing Cover Sheet

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(((H25000067092 3)))



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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600 Fax Number : (323)389-0502

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FLORIDA LIMITED LIABILITY CO.

The Red Sox Pro Baseball Club LLC

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LegalZoom com, Inc.

COVER LETTER

	Sew Filing Sec Division of Cor					
cuntre:	The Red Se	ox Pro Baseball Club	LLC			
SUBJEC	1:	Name (of Lim	ited Liabili	ty Company	
The enclo	sed Articles of	Organization and fee	(s) are	submitted	for filing.	
Please ret	um all correspo	ondence concerning th	nis mat	ter to the f	ollowing:	
	Erik Treutle	in				
				Name of	Person	
	Legalzoom.c	com, Inc.				
				Firm/Co	mpany	
	9900 Spectr	um Drive				
				Addr	288	
	Austin, TX	78717				
	terrymtn18@	gmail.com	Ci	ty/State an	d Zip Code	
	1	E-mail address: (to be	used	for future a	nnual report notificati	on)
For further	information co	ncerning this matter,	please	call:		
	Erik Trentlei	n			962-8600 ext. 9724 .)	
	Nam	ne of Person			Daytime Telephone	
Enclosed	is a check for t	he following amount:				
	0 Filing Fee	□\$130.00 Filing F Certificate of State	ee &	Certifi	S.00 Filing Fee & ed Copy al copy is enclosed)	□\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	New F Divisio P.O. B	ig Address illing Section on of Corporations fox 6327 assec, FL 32314			Street Address New Filing Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 3230	r Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The Red Sox Pro Baseball Club LLC	
(Must conatin the words "Limited Liability Con	npany, "L.L.C.," or "EFC.")
E II - Address:	
ng address and street address of the principal office of the L	imited Liability Company is:
Principal Office Address:	Mailing Address:
Timerpar Office Addition,	
600 Orchard Road Ext	
-	

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

Terry Smith			
	Name		2025
2001 NW 110th Ave			
Florida street addres	ss (P.O. Box <u>NOT</u> acc	eptable)	FJ EB 2 EJAR EJARS
Ocala	Florida	34482	
City	State	Zip	THE THE

Having been named as registered agent and to accept service of process for the above stated limited liability confidence 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.

/s/ Terry	Smith
	Registered Agent's Signature (REQUIRED)

(CONTINUED)

To:

A	R	T	ı	C	I.	E	I	٦	٠.
		4		•	_		•		

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:	Name and Address:
"AMBR" = Authorized Membe	r
"MGR" = Manager	
AMBR	Terry Michael Smith
	600 Orchard Road Ext,
	Elizabethton, TN 37643
AATDD	To Michael Jaima Smith
AMBR	Ty Michael Jaime Smith 600 Orchard Road Ext,
	Elizabethton, TN 37643
<u>AMBR</u>	Brett Gerald Smith
	600 Orchard Road Ext.
	Elizabethton, TN 37643
AMBR	Wade Michael Smith
	600 Orchard Road Ext,
	Elizabethton, TN 37643
(Use attachment if necessary)	
the date of filing.)	loes not meet the applicable statutory filing requirements, this date will not be listed as partment of State's records.
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	
/s/ Terry Mic	hael Smith
This document I am aware that	e of a member or an authorized representative of a member. is executed in accordance with section 605.0203 (1) (b). Florida Statutes, any false information submitted in a document to the Department of States, ird degree felony as provided for in s.817.155. F.S.
Torry M	ichael Smith
1 (11) 141	Typed or printed name of signee
	## N 77
	Filing Fees: les of Organization and Designation of Registered Agent tional) (Outional)
\$125.00 Filing Fee for Articl	les of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Op	tional)
\$ 5.00 Certificate of Status	(Optional)
•	
	~ ,

Attachment to

Articles of Organization for

The Red Sox Pro Baseball Club LLC

Additional members of the Limited Liability Company are:

To:

Name of Member	Address
Shannon Kia Smith	600 Orchard Road Est, Elizabethton, TN 37643
Ashley Camille Smith	600 Orchard Road Ext, Elizabethton, TN 37643
Sara Louise Smith	600 Orchard Road Ext. Elizabethton, TN 37643