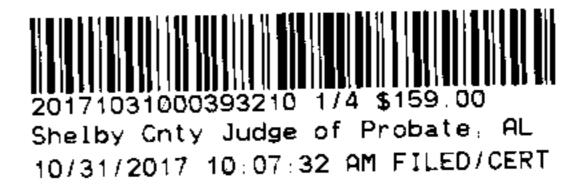
#### STATE OF ALABAMA

## DOMESTIC NONPROFIT CORPORATION CERTIFICATE OF FORMATION

PURPOSE: In order to form a Nonprofit Corporation under Section 10A-1-3.05 and 10A-3-3.02 of the Code of Alabama 1975 this Certificate Of Formation and the appropriate filing fees must be filed with the Office of the Judge of Probate in the county where the corporation's initial registered office is located. The information required in this form is required by Title 10A.

INSTRUCTIONS: Mail one (1) signed original and two (2) copies of this completed form and the appropriate filing fees to the Office of the Judge of Probate in the county where the



(For County Probate Office Use Only)

corporation's registered office is/will be located. Contact the Judge of Probate's Office to determine the county filing fees. Make a separate check or money order payable to the Secretary of State for the state filing fee of \$100.00 and the Judge of Probate's Office will transmit the fee along with a certified copy of the Certificate to the Office of the Secretary of State within 10 days after the Certificate is issued. Once the Secretary of State's Office has indexed the filing the information will appear at <a href="https://www.sos.alabama.gov">www.sos.alabama.gov</a> under the Government Records tab and the Business Entity Records link – you may search by entity name. Your notification of filing was provided by the Probate Judge's Office via a stamped copy and the Secretary of State's Office does not send out a copy. You may pay the Secretary of State fees by credit card if the county you are filing in will accept that method of payment (see attached). Your corporation will not be indexed if the credit card does not authorize and will be removed from the index if the check is dishonored.

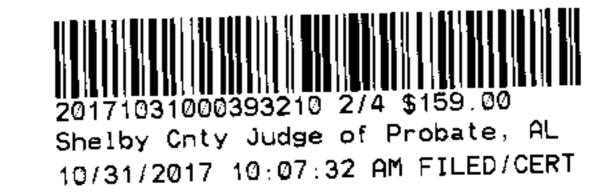
#### This form must be typed or laser printed.

1.	The name of the corporation: Elite Basketball Sports and Develops	nent, Inc
2.	A copy of the Name Reservation certificate from the Cattached.	Office of the Secretary of State must be
3.	This nonprofit corporation (MUST check one):	(For SOS Office Use Only)
	has Members or has no Members	
This form was prepared by: (type name and full address)  DeWayne Moore 6675 Highway 26 Columbiana, AL 35051		
DN	P Corp Cert of Formation - 7/2011 page 1 of 3	

### DOMESTIC NONPROFIT CORPORATION CERTIFICATE OF FORMATION

4.	Street (No PO Boxes) address of principal office of the corporation: 6675 Highway 26 ~Columbiana, AL 35051	
	Mailing address of principal office (if different from street address):	
5.	The name of the Registered Agent: DeWayne Moore	
	Street (No PO Boxes) address of Registered Agent (if different from principal office address):	
	Mailing address of Registered Agent (if different from street address):	
7.	Purpose for which corporation is formed: to assist students in becoming knowledgeable, thinking and responsible	
	citizens of their community, nation and the world.  ; the purpose includes the transaction of any lawful business for which nonprofit corporations may be incorporated in Alabama under Title 10A, Chapter 3 of the Code of Alabama.	
8.	Period of duration shall be perpetual unless stated otherwise by an attached exhibit.	
9.	The name(s) of the Incorporator(s): DeWayne Moore	
	Street (No PO Boxes) address of Incorporator(s): 6675 Highway 26 ~ Columbiana, AL 35051	
	Mailing address of Incorporator(s) – (if	
	different from street address):	
10.	The number of Directors constituting the initial Board of Directors is 3 The initial Directors names and addresses must be listed in this Certificate of Formation.	
	Director's Name: Dewayne Moore	
	Street (No PO Boxes) address of Director: 6675 Highway 26 ~ Columbiana, AL 35051	
	Mailing address of Director(s) - (if different	
	from street address):	

DNP Corp Cert of Formation - 7/2011



Page 2 of 3

#### DOMESTIC NONPROFIT CORPORATION CERTIFICATE OF FORMATION

Director's Name: T. R. Dunn ~ 1745 McMillian Ave SW ~ Birmingham, AL 35211		
Street (No PO Boxes) address of Director:		
	Mailing address of Director(s) - (if different	
from street address):		
Director's Name: Karen Moore ~ 147 Somersby Cir	cle ~ Pelham, AL 35214	
Street (No PO Boxes) address of Director:		
	Mailing address of Director(s) - (if different	
from street address):		
Attach listing if more Directors need to be ac Director on this form).	ided (type "see attached" in the name line for the first	
be made only by amendment to the Certificate of amendment to the bylaws shall be controlling. In	tion provides that a change in the number of directors shall of Formation, a change in the number of directors made by all other cases, whenever a provision of the Certificate of sion of the Certificate of Formation shall be controlling.	
<del></del>	t inconsistent with law relating to organization, ownership, nternal affairs of the nonprofit corporation, including any tion or final liquidation.	
09 / 06 / 2017		
Date (MM/DD/YYYY)	Signature as required by 10A-1-3.04	
	DeWayne Moore  Syped Name of Above Signature	
	Chief Executive Officer Typed Title/Capacity to Sign under 10A-1-3.04	

20171031000393210 3/4 \$159.00 Shelby Cnty Judge of Probate, AL John H. Merrill Secretary of State P.O. Box 5616 Montgomery, AL 36103-5616

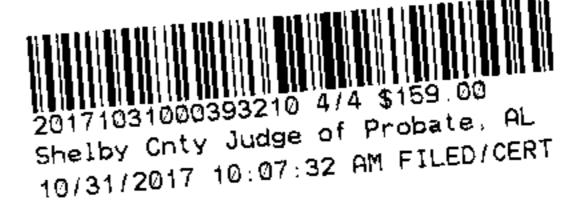
# STATE OF ALABAMA

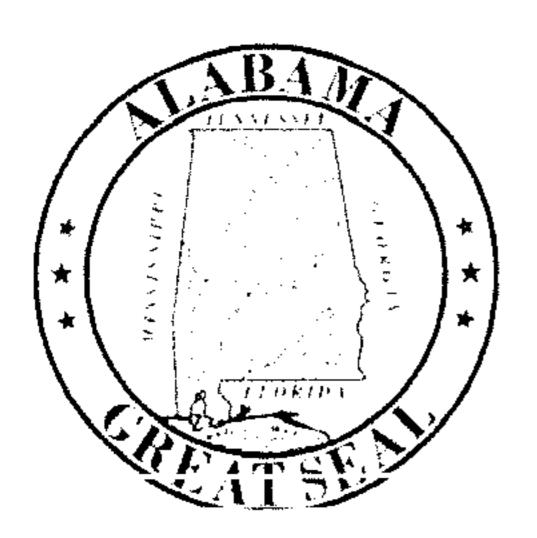
I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

pursuant to the provisions of Title 10A, Chapter 1, Article 5, Code of Alabama 1975, and upon an examination of the entity records on file in this office, the following entity name is reserved as available:

Elite Basketball Sports and Development, Inc.

This name reservation is for the exclusive use of Dewayne Moore, 6775 Highway 26, Columbiana, AL 35051 for a period of one year beginning September 05, 2017 and expiring September 05, 2018





RES770772

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

September 05, 2017

Date

J. W. M.

John H. Merrill

**Secretary of State**