NAME: SUNDOC FILINGS

ADDRESS: 7801 FOLSOM BLVD. SUITE 202

CITY: SACRAMENTO

STATE: CA

ZIP CODE:95826



DEAN C. LOGAN, REGISTRAR-RECORDER/COUNTY CLERI

Electronically signed by TERESA QUEVEDO

FICTITIOUS BUSINESS NAME STATEMENT

The following person(s) is (are) doing business as:

1.AYSO		2.AYSO UNITED				
Fictitious Business Na 19700 S. VERMONT	` '	TTE 102	1			
	f principal place of busine		Mailing address	if different		
TORRANCE CA	9050				The second	
City Stat		COUNTY	City	State	Zip	
Articles of Incorporation or Organization	n Number (if applicable):	AI#ON 033/398				
REGISTERED OWNER(S):						
1. AMERICAN YOUT			1, 19 (19) 1, 19 (19) 1, 19 (19)			
Full Name/Corp/LLC (P.O. Box not accepted) If Corp/LLC must be registered in CA 19700 S VERMONT AVENUE SUITE 103			Full Name/Corp/LLC (P.O. Box not accepted)			
Residence Address (if Corp. or L			Residence Address			
TORRANCE	CA	90502	· · · · · · · · · · · · · · · · · · ·			
CALIEODNIA	State	Zip	City	State	Zip	
CALIFORNIA If Corporation or LLC – Print Sta	te of Incorporation/Organ	ization	If Corporation or LLC -	- Print State of Incorporation/Organ	nization	
		N TWO REGISTRANTS, ATTAC	H ADDITIONAL SHEET SHO	WING OWNER INFORMATION		
□ an Unincorporated □ a Married Couple The date registrant commence (A registrant who descriptions to be registrant known)	□ Joint Ventur d to transact busines I decla eclares as true a	e	in this statement is	Partners □ a Limited above on $\frac{09/1964}{\text{(Insert N/A above if you haven')}}$	Professions Code that	
REGISTRANT/CORP/LLC NAME (PRINT						
REGISTRANT SIGNATURE	THE T			MEMATTHEW WIN	EGAR	
If corporation, also print corp	orate title of office					
NOTICE – IN ACCORDANCE WITH S WHICH IT WAS FILED IN THE OFFIC IN THE FACTS SET FORTH IN THE S FICTITIOUS BUSINESS NAME STAT ACCOMPANIED BY THE AFFIDAVIT	UBDIVISION (a) OF SE E OF THE COUNTY CLE TATEMENT PURSUAN EMENT MUST BE FILED	/ CTION 17920, A FICTITIOUS NA ERK, EXCEPT, AS PROVIDED I IT TO SECTION 17913 OTHER T	ME STATEMENT GENERALI N SUBDIVISION (b) OF SECT THAN A CHANGE IN THE RES	LY EXPIRES AT THE END OF FIV TION 17920, WHERE IT EXPIRES SIDENCE ADDRESS OF A REGIS	TERED OWNER. A NEW	
THE FILING OF THIS STATEMENT D UNDER FEDERAL, STATE, OR COM				INESS NAME IN VIOLATION OF	THE RIGHTS OF ANOTHER	
I HEREBY CERTIFY TI	HAT THIS COPY IS .	A CORRECT COPY OF T	HE ORIGINAL STATEM	ENT ON FILE IN MY OFFIC	E.	
			BY:	QUEVEDO	, Deputy	
Rev 4/2021	P.O. BOX 1208	NORWALK CA 90651-1208	DEAN C. LO	GAN LOS ANGELES COUN	NTY CLERK	

This is a true and certified copy of the record if it bears the seal, imprinted in purple ink, of the Registrar-Recorder/County Clerk

OCT 0 7 2021

Deau C. Los M. REGISTRAR-RECORDERICOUNTY CLERK LOS ANGELES COUNTY, CALIFORNIA