Secretary of State Office 500 E Capitol Ave Pierre, SD 57501 (605)773-3537

Manager of the

· · · ofto Internationally Colly

Athlete Agent Registration Form

Please Type or Print Clearly in Ink

Make Payment Payable to SECRETARY OF STATE

Please check the applicable filing status.

- x Initial Application \$100 Fee
- Application based on certification in another state per §59-10-5(b): \$50 Fee
- Application for Renewal \$25 Fee

SD Secretary of State

	ACT STORY AND COMPANY OF THE PARTY OF				
. Name: DAF	RNELL JAMES				
416.771.3819		CONTACT@JCDREAMS.COM			
Daytime Phon		Email Address			
The addres	s for the applic	cant's principal place of business:			
	REET SUITE 120	4			A Mariana Mariana
Street Address		City	RONTO	ONTARIO	M5R 2A5
		Sity		State	ZIP
Mailing Addres	ss (Optional)	City	,	State	ZIP
The name of	of the applican	t's business or employer:			
JC DREAMS					
		92 5.2			
application:	iness or occu	pation engaged in by the applicant for th	e five years next precedi	ng the date of	f the
JC DREAMS	SPORTS				
	,=				
3.11					
Provide a bi	rief description	of your training as an athlete agent:	*		
		3 18			
NDA CENTIF	FIED AGENT SI	NCE 2011.			
Provide a br	rief description	of your practical experience as an athle	ate agent:		
the National	S of experience	representing professional athletes in contracters Association's annual agent seminar to re	ct negotiations, brand partner	erships, etc. Re	egularly attend
athlete repres	sentation.	era Association's amual agent seminar to re	main current on regulations	and best pract	ices governing
Provide a br	ief description	of your educational background related	to belon on other and		
			to being an atmete agen	L.	
BACHELOR	OF COMMERC	DE DEGREE			
Provide nam	es and addre	sses of three references not related to the	ne applicant:		
PAUL KALDA	AS	755 QUEENSWAY EAST	MISSISSAUGA	ON	147.400
Name		Address	City	State	L4Y 4C5 ZIP
PETER MEYR	ICK	27 QUEEN STREET EAST	TORONTO	ON	M5C 2M6
Name		Address	City	State	
DAN TADROS		79 BRAMSTEELE ROAD	BRAMPTON	ON	L6T 1A9
Name		Address	City	ON	LUI INS

MICHAEL COBBINS	BASKETBALL	Brescia Leonessa		
Name	Sport	Last Known Team		
DANIEL ORTON	BASKETBALL	Taoyuan Leopards		
Name	Sport	Last Known Team		
Name	Sport	Last Known Team		
Name	Sport	Last Known Team		
If the applicant's busines managers, or profit-share	s is not a corporation, list the names and		bers, o	fficers,
Name	Address	City	State	ZIP
Name	Address	City	State	ZIP
If the business employing any shareholder of the co	g the applicant is a corporation, list the na prporation having a five percent interest of	ames and addresses of the office or greater.	rs, dire	ctors, and
DARNELL JAMES	1200 BAY STREET, SUITE 1201	TORONTO	ONTAR	NO M5R 2A5
Name	Address	City	State	ZIP
Name	Address	City	State	ZIP
 Have you or anyone liste would be considered a cr 	d in questions 10 or 11 been convicted of ime of moral turpitude or a felony?	of a crime, that in South Dakota,	-	Yes <u>x</u> No
If yes please identify the	crime:			
 Have you or anyone lister have made false, mislead 	d in questions 10 or 11 been administrat fing, deceptive or fraudulent representati	ively or judicially determined to ions?	_	Yes <u>x</u> No
sanction, suspension, or	of anyone listed in questions 10 or 11 re declaration of ineligibility to participate in ent on a student athlete or educational in	an interscholastic or	_	Yes <u>×</u> No
 Have you or anyone lister taken against you / them 	d in questions 10 or 11 had any sanction because of occupational or professional	, suspension or disciplinary actio conduct?	n _	Yes <u>X</u> No
 Have you or anyone lister revocation of, or refusal to 	d in questions 10 or 11 ever been denied or renew the athlete agents registration of	d an application for, suspension of licensure?	r	Yes X No
Attach additional pages as ne	eded when there is insufficient room to f	fully complete a question.		
I declare under penalty of per application and any accompa	jury, under the laws of the State of South nying documents are true and correct.	n Dakota, that all statements cont	ained in	n this
Dated 10/05/2025	(Signati	ure of Applicant)		
		ELL JAMES		



Pierre, SD 57501-5070

DARNELL JAMES 1200 BAY STREET SUITE 201 TORONTO ON M5R 2A5 CANADA

RECEIPT INFORMATION

Receipt #:

002742303

Receipt Date: 10/29/2025

DO NOT PAY! This is not a bill.

Description of Charges	Reference	Quantity	Unit Price	Total
Athlete Agent Initial Registration		1	\$100.00	\$100.00

TOTAL CHARGES PAID

\$100.00

Diseasing the state of the stat		
Description of Payment	Reference	Amount
Payment-Check/MO	55046103261	\$100.00

TOTAL PAYMENT

\$100.00



RECEIVED

NOV 2 0 2025

SD Secretary of State

Darnell James 1200 Bay Street, Suite 1201 Toronto, ON M5R 2A5

Attached is your South Dakota Athlete Agent certificate.

This certificate may not be transferred or used by any other person or business entity other than the person or business entity to whom the certificate was issued.

Services are subject to sales tax in South Dakota. If you are providing your service in South Dakota, you need to apply for a SD Sales Tax license. Please visit the South Dakota Department of Revenue website at dor.sd.gov.

State of South Dakota Department of Labor and Regulation

Darnell James

JC Dreams Sports 1200 Bay Street, Suite 1201 Toronto ON M5R 2A5

Has been registered by the SD Department of Labor and Regulation as an

ATHLETE AGENT

Effective: 11/06/2025

EXPIRATION: 11/05/2027

Marcia Hultman.

Secretary of Labor & Regulation

This certificate is non-transferable to any other person or entity other than to whom the certificate was issued.

Filed this

day of

November 2025

SECRETARY OF STATE