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Office Use Only



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### **COVER LETTER**

TO: New Filing Section Division of Corporations
SUBJECT: <u>Advanced Hearthstyles Fitness Equipment</u> , unc.  Name of corporation - must include suffix
Dear Sir or Madam:
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.
Please return all correspondence concerning this matter to the following:
Soroh Peta(50n Name of Person
Name of Person
- advanced Hearthsfyles Firm Company
861 SputhPark Dr #100
Address
Luttleton, Co 80120
City/State and Zip code
E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Parah Petalson at (303) 996 0048 × 1020  Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:  New Filing Section  Division of Corporations  Clifton Building  2661 Executive Center Circle  Tallahassee, FL 32301  MAILING ADDRESS:  New Filing Section  Division of Corporations  P.O. Box 6327  Tallahassee, FL 32314
Enclosed is a check for the following amount:
☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & ☐ \$78.75 Filing Fee & ☐ \$78.75 Filing Fee & Certificate of Status

Certified Copy

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

(Enter name of cor	poration; must include "IN p," "Inc," "Co," or "Corp."	CORPORATED,"		ORPORA?	CION,"		_
							<del></del>
(If name unavailab	ole in Florida, enter alternat	te corporate name a	adopted for the purpo	ose of trans	acting business i	n Florida	1)
2. Colora		3.					
(State or country under the law of which it is inco		s incorporated)	(FEI number, if applicable)				
1 7/1/96		5.	Parpetus	-l			
(Date o	of incorporation)		(Duration: Year co	rp. will cea	ise to exist or "p	erpetu al'	")
6 01/	01/15						
0	(Date first tra		ı Florida, if prior to r 502, F.S., to determin	-		<del></del>	
7. 861	South Park DY	/ At 100	Littleton.	ھ	80120		<del></del>
	(P	rincipal office add	ress)		-m-j	<u>ــــــــــــــــــــــــــــــــــــ</u>	
861	South Park DY	¥100	littleton	<u> </u>	80180	-51 	See Miles
	(C	Current mailing add	ress)			600	managan, managa <sub>ra s</sub>
					3		ļ.
8. Name and street	t address of Florida regis	stered agent: (P.	O. Box <u>NOT</u> acce	ptable)	in the	1 理	No.
Name:	C T Corporat	ion System	<del></del>		FLOR	372	£
Office Address:	1200 South Pine Island		Road		5	5,44	r
	Plantation		, Florida	3324	adore in the second		
	(Cit	y)	(2	Zip code)			

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Sierra Burris
Vice President & Assistant Secretary

(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors: Gregg Spieker 818 Faircheld Dr., Highlands Reach, co 80126 resident: Vice Chairman: Address: Director: \_\_\_\_ Address: Address: **B. OFFICERS** Address: Vice President: Address: Secretary: Address: \_\_\_\_ Treasurer: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that 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. Graga Spieker, President
(Typed or printed name and capacity of person signing application)

## OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

#### CERTIFICATE

I, Wayne W. Williams, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

#### ADVANCED HEALTHSTYLES FITNESS EQUIPMENT, INC.

is a **Corporation** formed or registered on 04/11/1996 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 19961049996.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 01/27/2015 that have been posted, and by documents delivered to this office electronically through 01/29/2015 @ 15:12:41.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Denver, Colorado on 01/29/2015 @ 15:12:41 pursuant to and in accordance with applicable law. This certificate is assigned Confirmation Number 9078754.



Mayne W. Williams

Secretary of State of the State of Colorado

\*\*\*\*\*\*\*\*End of Certificate\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Certificate Confirmation Page of the Secretary of State's Web site, <a href="http://www.sos.state.co.us/biz/CertificateSearchCriteria.do">http://www.sos.state.co.us/biz/CertificateSearchCriteria.do</a> entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, <a href="http://www.sos.state.co.us/click Business Center and select">http://www.sos.state.co.us/click Business Center and select "Frequently Asked Questions."</a>