

603000030356

03 AUG 14 AM 11:50

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

Michael C. Angotti
(Requestor's Name)

4 Royal Palm Way #201
(Address)

Boca Raton FL 33432
(Address)

561-385-5657
(City/State/Zip/Phone #)

PICK-UP

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06/30/03--01030--013 **160.00

Maximum Results Personal Training & Fitness LLC.
(Business Entity Name)

(Document Number)

Certified Copies 1 Certificates of Status 1

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W03-19131

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FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

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03 AUG 14 AM 11:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

July 7, 2003

MICHAEL ANGOTTI
4 ROYAL PALM WAY #201
BOCA RATON, FL 33432

SUBJECT: MAXIMUM RESULTS PERSONAL TRAINING & FITNESS, LLC
Ref. Number: W03000019131

We have received your document for MAXIMUM RESULTS PERSONAL TRAINING & FITNESS, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt
Document Specialist

Letter Number: 403A00040145

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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03 AUG 14 AM 11:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

Maximum Results Personal Training + Fitness LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

4 Royal Palm Way #201 Boca Raton, FL 33432

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Michael Christopher Angetti

Name

4 Royal Palm Way #201

Florida street address (P.O. Box NOT acceptable)

Boca Raton

FL 33432

City, State, and Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company 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 608, F.S.

Registered Agent's Signature

(An additional article must be added if an effective date is requested)

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Jethro M. Angetti

Typed or printed name of signer

Filing Fees:

- \$100.00 Filing Fee for Articles of Organization
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)