

L09000054764

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

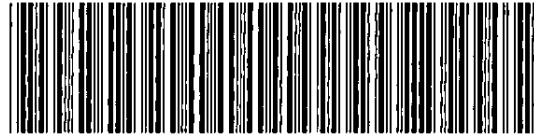
(Business Entity Name)

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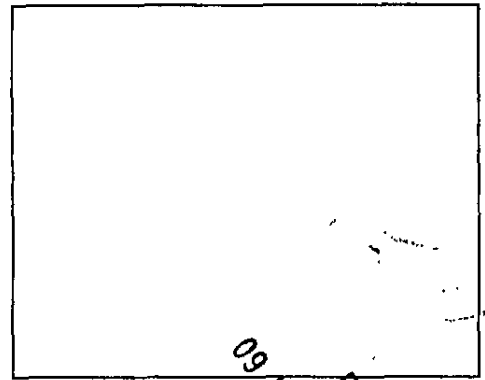
06/05/09--01007--014 **155.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. KOHR
JUN - 8 2009
EXAMINER

FLORIDA RESEARCH & FILING SERVICES, INC.
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WALK-IN

ENTITY NAME:

RETROFITNESS OF SATELLITE BEACH, LLC

CK# 3958

AMOUNT \$155.00

PLEASE FILE THE ATTACHED ARTICLES OF ORGANIZATION & RETURN THE FOLLOWING:

XXX CERTIFIED COPY

STAMPED COPY

CERTIFICATE OF STATUS

Examiner's Initials

ARTICLES OF ORGANIZATION

The undersigned, desiring to form a limited liability company under the Florida Limited Liability Company Act (LLCA) hereby certifies that:

Throughout these Articles of Organization, any word or words that are defined in the LLCA, as amended from time to time, shall have the same meaning as provided in the LLCA, and the word or words listed below within quotation marks shall be deemed to include the words which follow them.

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CLERK OF STATE
TALLAHASSEE, FLORIDA

- A. "Articles" - These Articles of Organization.
- B. "Company" - This Limited Liability Company.

1. Company Name. The name of the Limited Liability Company shall be Retrofitness of Satellite Beach, LLC (the "Company").

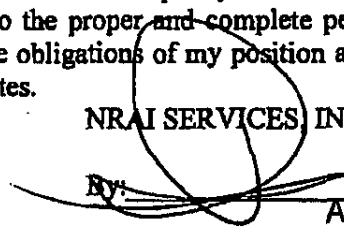
2. Address. The mailing address and street address of the principal office of the Company is: 6 Colonial Lake Drive, Suite A, Lawrenceville, New Jersey 08648.

3. Registered Agent, Registered Office, and Registered Agent's Signature: The name and Florida street address of the registered agent are:

NRAI Services, Inc., 2731 Executive Park Drive, Suite 4, Weston, FL 33331

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in these Articles, 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, Florida Statutes.

NRAI SERVICES, INC.

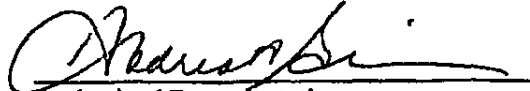
By:  Peter F. Souza
Assistant Secretary

4. Management. The names and addresses of the Managers are as follows:

- | | |
|------------------------|---|
| Scott Plapinger | 6 Colonial Lake Drive, Suite A
Lawrenceville, NJ 08648 |
| Keith Plapinger | 25 Joy Street
Boston, MA 02114 |
| Lawrence Platt | 265 Freeman Parkway
Providence, RI 02906 |

5. **Date of Formation and Term.** The Company shall be formed at the time of the filing of these Articles in the Office of the Secretary of State of the State of Florida and shall exist in perpetuity unless dissolved in accordance with the terms of the Operating Agreement.

IN WITNESS WHEREOF, the undersigned has been duly authorized to execute these Articles of Organization this 3rd day of June, 2009.



Authorized Representative
Andrea A. Guerieri, Paralegal
Stark & Stark, P.C.
993 Lenox Drive
Lawrenceville, New Jersey 08648