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(Requestor's Name)

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PICK-UP WAIT MAIL

(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FL

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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

1220 FITNESS, INC

Signature _____

Requested by:

Name _____ Date _____ Time _____

Walk-In _____ Will Pick Up _____

- Art of Inc. File _____
- LTD Partnership File _____
- Foreign Corp. File _____
- L.C. File _____
- Fictitious Name File _____
- Trade/Service Mark _____
- Merger File _____
- Art. of Amend. File _____
- RA Resignation _____
- Dissolution / Withdrawal _____
- Annual Report / Reinstatement _____
- Cert. Copy _____
- Photo Copy _____
- Certificate of Good Standing _____
- Certificate of Status _____
- Certificate of Fictitious Name _____
- Corp Record Search _____
- Officer Search _____
- Fictitious Search _____
- Fictitious Owner Search _____
- Vehicle Search _____
- Driving Record _____
- UCC 1 or 3 File _____
- UCC 11 Search _____
- UCC 11 Retrieval _____
- Courier _____

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME 1220 FITNESS, INC.
The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE
Principal street address _____

Mailing address, if different is: _____

1220 NE 8TH AVE
FT. LAUDERDALE, FL 33304

1224 NE 7TH AVE
FT. LAUDERDALE, FL 33304

ARTICLE III PURPOSE ALL LAWFUL PURPOSES.
The purpose for which the corporation is organized is: _____

ARTICLE IV SHARES 300
The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MARK LAURO, PRESIDENT

Name and Title: ERIC LAURO, VICE PRESIDENT

Address 1224 NE 7TH AVE
FT. LAUDERDALE, FL 33304

Address: 1224 NE 7TH AVE
FT. LAUDERDALE, FL 33304

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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TALLAHASSEE, FL

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Name and Title: _____ Name and Title: _____
 Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: MARK LAURO
 Address: 1224 NE 7TH AVE
FT. LAUDERDALE, FL 33304

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: MARK LAURO
 Address: 1224 NE 7TH AVE
FT. LAUDERDALE, FL 33304

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ARTICLE VIII EFFECTIVE DATE: NOVEMBER 11, 2019

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Mark Lauro
 Required Signature/Registered Agent

NOV. 12, 2019
 Date

I submit this document and affirm that the facts stated herein are true. I am aware that the 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.

Mark Lauro
 Required Signature/Incorporator

NOV. 12, 2019
 Date