

# FO10000001859

## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** INDEE INC DBA LA WEIGHT LOSS CENTERS  
(Name of corporation - must include suffix)

Dear Sir or Madam:

600003829056--3  
-03/09/01--01119--017  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", 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:

W01-5615

Kelly Walsh  
(Name of Person)

INDEE, INC. DBA LA WEIGHT LOSS CENTER  
(Firm/Company)

4117 Hillsboro Pike Suite 208  
(Address)

NASHVILLE, TN 37215  
(City/State and Zip code)

For further information concerning this matter, please call:

Kelly Walsh at ( 910 ) 794-9112  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

FILED  
01 APR -2 AM 2:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee    ☐ \$78.75 Filing Fee & Certificate of Status    ☐ \$78.75 Filing Fee & Certified Copy    ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

4/5



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

March 13, 2001

KELLY WALSH  
4117 HILLSBORO PIKE, STE 208  
NASHVILLE, TN 37215

SUBJECT: INDEE, INC.  
Ref. Number: W01000005615

We have received your document for INDEE, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete the additional page that was not with your original application,

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 487-6097.

Michael Mays  
Document Specialist

Letter Number: 401A00015213

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SECRETARY OF STATE

**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.

1. INDIE INCORPORATED  
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. TN  
(State or country under the law of which it is incorporated)
3. 62-1755113  
(FEI number, if applicable)
4. 9/21/1998  
(Date of incorporation)
5. perpetual  
(Duration: Year corp. will cease to exist or "perpetual")
6. Jan 26, 2001  
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")  
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 4117 Hillsboro Pike Suite 208 NASHVILLE TN 37215  
(Principal office address)  
4650 South Cleveland Ave Suite 208  
Fort Myers Florida 33907  
(Current mailing address)  
1980 Tamiami Trail North  
Naples, Florida 34108  
LA Weight Loss  
1980 Tamiami Trail  
Port Charlotte, FL 33949
8. Opening a weight Loss Center  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)  
Name: BEV CLIFFORD  
Office Address: 3509 SW SUNSET TRACE CR  
PALM CITY, Florida 34991  
(City) (Zip code)
10. 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.

Bev Clifford

(Registered agent's signature)

11. 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.

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SECRETARY OF STATE

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Vice Chairman: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Director: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Director: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

B. OFFICERS

President: Dana Goodman  
Address: 6452 Edinburgh Drive  
Brentwood, TN 37221  
Vice President: Deana Nichols  
Address: 1005 Riverwood Place  
Franklin, TN 37069  
Secretary: Barry Goodman  
Address: Same as Dana Goodman  
\_\_\_\_\_  
Treasurer: Ron Nichols  
Address: Same as Deana Nichols  
\_\_\_\_\_

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TALMADGE

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. W. Barry Goodman - Secretary  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14. William Barry Goodman - Secretary 3/12/07  
(Typed or printed name and capacity of person signing application)

## **Florida Locations**

### **Location**

1. LA Weight Loss Center  
1900 Tamiami Trail  
Shop #136, Murdock Carrousel  
Port Charlotte, FL 33948
  
2. LA Weight Loss Center  
Tanglewood Marketplace  
4910 Tamiami Trail North Unit 116  
Naples, FL 34103
  
3. LA Weight Loss Center  
South Plaza  
4650 South Cleveland Ave  
Suite 2 - A  
Fort Myers, FL 33907

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TALLAHASSEE, FLORIDA

**Secretary of State  
Division of Business Services**

**312 Eighth Avenue North  
6th Floor, William R. Snodgrass Tower  
Nashville, Tennessee 37243**

ISSUANCE DATE: 02/07/2001  
REQUEST NUMBER: 01038113  
TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 09/21/1998  
STATUS: ACTIVE  
CORPORATE EXPIRATION DATE: PERPETUAL  
CONTROL NUMBER: 0357749  
JURISDICTION: TENNESSEE

TO:  
INDEE, INC.  
4117 HILLSBORO PK  
SUITE 208  
NASHVILLE, TN 37215

REQUESTED BY:  
INDEE, INC.  
4117 HILLSBORO PK  
SUITE 208  
NASHVILLE, TN 37215

**CERTIFICATE OF EXISTENCE**

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT

"INDEE, INC."

IS A CORPORATION DULY INCORPORATED UNDER THE LAW OF THIS STATE WITH DATE OF  
INCORPORATION AND DURATION AS GIVEN ABOVE;  
THAT ALL FEES, TAXES, AND PENALTIES OWED TO THIS STATE WHICH AFFECT THE  
EXISTENCE OF THE CORPORATION HAVE BEEN PAID;  
THAT THE MOST RECENT CORPORATION ANNUAL REPORT REQUIRED HAS BEEN FILED  
WITH THIS OFFICE; AND  
THAT ARTICLES OF DISSOLUTION HAVE NOT BEEN FILED; AND  
THAT ARTICLES OF TERMINATION OF CORPORATE EXISTENCE HAVE NOT BEEN FILED

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01 APR -2 AM 2:58  
SECRETARY OF STATE  
TALLAMOUNT, TENN

FOR: REQUEST FOR CERTIFICATE

ON DATE: 02/07/01

FROM:  
INDEE INC.  
6452 EDINBURGH DR  
NASHVILLE, TN 37221-0000

	FEES	
RECEIVED:	\$20.00	\$0.00
TOTAL PAYMENT RECEIVED:		\$20.00
RECEIPT NUMBER:	00002805560	
ACCOUNT NUMBER:	00328222	



*Riley C Darnell*

RILEY C. DARNELL  
SECRETARY OF STATE