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SECRETARY OF STATE TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

Division of Corporations	
SUBJECT: Training Together, Inc.	
	poration - must include suffix)
Dear Sir or Madam:	
	on for Authorization to Transact Business in Florida", ted to register the above referenced foreign corporation
Please return all correspondence concerning this	matter to the following:
Barbara Petrinsky	
(Na	ame of Person)
Training Together, Inc.	5.
(Fi	rm/Company)
6025 S. Quebec Street, Suite 150	LCRE #A
	(Address)
Englewood, CO 80111	SET O
(City/	State and Zip code)
For further information concerning this matter, p	ORIDA 20
Barbara Petrinsky at (303 🖺 489-8873
(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
Enclosed is a check for the following amount:	_
Ø \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fee,

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.

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.) Colorado 3 84-1597208 (State or country under the law of which it is incorporated) 4 July 16, 2001 (Date of incorporation) Upon Qualification (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.) 20423 State Road 7, Bay F-4-B, Boca Raton, FL 33498 (Current mailing address) (Current mailing address) Operation of physical fitness centers (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida. Name: John M. D. Woolford 20423 State Road 7, Bay F-4-B Boca Raton (City) Florida Florida 33498 (Zip code)	· ·	ogether, Inc.	TED", "COMPANY", "CORPORATION" or
(State or country under the law of which it is incorporated) July 16, 2001 (Date of incorporation) (Date of incorporation) (Date of incorporation) (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.) 20423 State Road 7, Bay F-4-B, Boca Raton, FL 33498 (Principal office address) (Current mailing address) (Current mailing address) (Current mailing address) (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) (Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) (Piffice Address: Doca Raton (City) (City) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) (Principal office address) (Current mailing address) (Current mail	words or abbrev	viations of like import in language as will clea	rly indicate that it is a corporation instead of a
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(Date of incorporation) (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.) 20423 State Road 7, Bay F-4-B, Boca Raton, FL 33498 (Principal office address) (Current mailing address) Operation of physical fitness centers (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) Name: John M. D. Woolford Office Address: Doca Raton (City) One Registered agent's acceptance:	(State or country	under the law of which it is incorporated)	(FEI number, if applicable)
Upon Qualification (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.) 20423 State Road 7, Bay F-4-B, Boca Raton, FL 33498 (Principal office address) (Current mailing address) Operation of physical fitness centers (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) Name: John M. D. Woolford Office Address: Doca Raton (City) OREGISTER OF JOHN JOHN JOHN JOHN JOHN JOHN JOHN JOHN	July 16,	2001	5. Perpetual
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(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) 20423 State Road 7, Bay F-4-B, Boca Raton, FL 33498 (Principal office address) (Principal office address) (Current mailing address) (Current mailing address) (Purposc(s) of corporation authorized in home state or country to be carried out in state of Florida (Purposc(s) of corporation authorized in home state or country to be carried out in state of Florida (P.O. Box or Mail Drop Box NOT acceptable) Name: John M. D. Woolford (City) (City) (Zip code) (City) (Zip code)	Upon Qu	alification	— · · · · · · · · · · · · · · · · · · ·
(Principal office address) 20423 State Road 7, Bay F-4-B, Boca Raton, FL 33498 (Current mailing address) Operation of physical fitness centers (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Name: John M. D. Woolford Grice Address: Boca Raton Florida Florida 33498 (City) City) OR Registered agent's acceptance:	(Date first transa		
20423 State Road 7, Bay F-4-B, Boca Raton, FL 33498 (Current mailing address) Operation of physical fitness centers (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Name: John M. D. Woolford 20423 State Road 7, Bay F-4-B Boca Raton (City) Registered agent's acceptance:	20423 St	ate Road 7, Bay F-4-B, Boca Rato	n, FL 33498
Operation of physical fitness centers (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Name: John M. D. Woolford 20423 State Road 7, Bay F-4-B Boca Raton (City) Registered agent's acceptance:		(Principal office ac	ddress) $\overline{A} = 0.00$
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(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Name: John M. D. Woolford Give Address: Boca Raton (City) Registered agent's acceptance:		(Current mailing ac	ddress)
Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Name: John M. D. Woolford 20423 State Road 7, Bay F-4-B	Operation	of physical fitness centers	
Name: John M. D. Woolford ### 20423 State Road 7, Bay F-4-B Boca Raton	(Purpose	(s) of corporation authorized in home state or	country to be carried out in state of Florida)
ffice Address: 20423 State Road 7, Bay F-4-B Boca Raton, Florida 33498 (City) (Zip code) O. Registered agent's acceptance:	Name and str	<u>cet address</u> of Florida registered agent	t: (P.O. Box or Mail Drop Box NOT acceptable)
Boca Raton Florida 33498	Name:	John M. D. Woolford	
(City) (Zip code) One Registered agent's acceptance:	ffice Address:	20423 State Road 7, Bay F-4-B	
). Registered agent's acceptance:		Boca Raton	Florida 33498
		(City)	(Zip code)
	n Registered s	ogent's accentance:	
laving been named as registered agent and to accept service of process for the above stated corporation at the pla			rvice of process for the above stated corporation at the pi

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.

(Registered agent's signature)

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

A. DIRE Chairman:	Thomas M. Violege, Or
	6025 S. Quebec Street, Suite 150, Englewood, CO 80111
-	
Vice Chair	man:
Address: _	
Director:	Thomas M. Vickers, Jr.
Address: _	20423 State Road 7, Bay F-4-B, Boca Raton, FL 33498
- Director:	John D. Woolford
Address:	20423 State Road 7, Bay F-4-B, Boca Raton, FL 33498
B. OFFI	
President: Address: _	20422 State Bood 7 Boy E 4 B Boog Boton El 22409
- Vice Presid	John D. Woolford
Address: _	20423 State Road 7, Bay F-4-B, Boca Raton, FL 33498
- Secretary:	Barbara Petrinsky
Address: _	6025 S. Quebec Street, Suite 150, Englewood, CO 80111
Freasurer:	Barbara Petrinsky
Address: _	6025 S. Quebec Street, Suite 150, Englewood, CO 80111
NOTE: 1	f necessary, you may attach an addendum to the application listing additional officers and/or directors. Southern String (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
_{14.} Ba	urbara Petrinsky, Secretary/Treasurer =
~ **	(Typed or printed name and capacity of person signing application)

Addendum to Application by Foreign Corporation for Authorization to Transact Business in Florida

Reference: Training Together, Inc.

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

A. DIRECTORS

Director: David C. Olson	
Address: 6025 S. Quebec Street, Suite 150, Englewood, CO 80111	
B. OFFICERS	O3 MAR 1 SECRETAR TALLAHASS
Chief Executive Officer: David C. Olson	EFO O
Address: 6025 S. Quebec Street, Suite 150, Englewood, CO 80111	F STA
	24



DEPARTMENT OF STATE CERTIFICATE

I, DONETTA DAVIDSON, Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

TRAINING TOGETHER, INC. (Colorado CORPORATION) File # 20011140612

was filed in this office on July 16, 2001 and has complied with the applicable provisions of the laws of the State of Colorado and on this date is in good standing and authorized and competent to transact business or to conduct its affairs within this state.

Dated: February 14, 2003

For Validation:

Certificate ID: 638143

To validate this certificate, visit the following web site, enter this certificate ID, then follow the instructions displayed.

www.sos.state.co.us/ValidateCertificate

SECRETARY OF STATE