

F1900000360

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

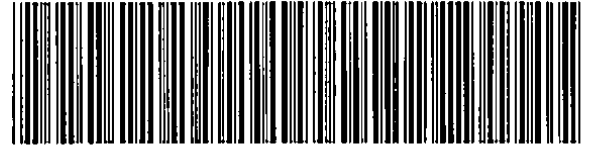
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

Y SCOTT

AUG 6 2019

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**Law Office of
Richard B. Sabra & Associates**

4600 Sheridan Street, Suite 300
Hollywood, FL 33021
(954) 989-8940 Fax (954) 966-3740
RICHARD B. SABRA rbs@sabralaw.com

July 22, 2019

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

RE: Renaissance Fitness & Wellness, Inc.
Application for Foreign Corporation to Transact Business in Florida

Dear Sir/Madam:

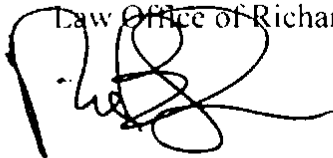
Enclosed are the following:

1. Cover Letter;
2. Application by Foreign Corporation for Authorization to Transact Business in Florida;
3. Certificate of Standing from the State of New Jersey; and
4. My firm check number 1854 in the sum of Seventy and 00/100 Dollars (\$70.00) to cover the filing fee for the entity named above. Please process accordingly.

If you have any questions, please call me.

Thank you.

Law Office of Richard B. Sabra & Associates



Richard B. Sabra

Encls. (as noted above)

cc: Joseph Stein (via e-mail)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Renaissance Fitness & Wellness, Inc.
Name of corporation - must include suffix

Dear Sir or Madam:

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

Richard B. Sabra, ESQ.
Name of Person
Law Office of Richard B. Sabra & Associates
Firm/Company
4600 Sheridan Street, Suite 300
Address
Hollywood, FL 33021
City/State and Zip code
rbse@sabralaw.com
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Richard B. Sabra at (954) 989-8940
Name of Person Area Code Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

**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. Renaissance Fitness & Wellness, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. New Jersey 3. 22-3508272
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. April 17, 1997 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 16 Hickory Lane, Little Silver, NJ 07739
(Principal office address)

c/o Richard B. Sabra, Esq., 4600 Sheridan Street, Suite 300,
(Current mailing address, if different) Hollywood, FL 33021

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

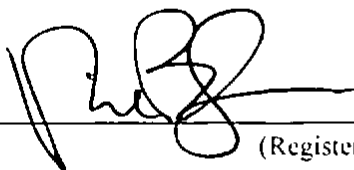
Name: Richard B. Sabra, Esq.

Office Address: 4600 Sheridan Street, Suite 300

Hollywood, Florida 33021
(City) (Zip code)

9. **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.



(Registered agent's signature)

10. 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.

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: JOSEPH L. STEIN ✓

Address: 16 HICKORY LANE

LITTLE SILVER, NJ 07739

Director: _____

Address: _____

B. OFFICERS

C.E.O. JOSEPH L. STEIN ✓
~~President:~~

Address: 16 HICKORY LANE

LITTLE SILVER, NJ 07739

Vice President: KARIN L. STEIN

Address: 16 HICKORY LANE

LITTLE SILVER, NJ 07739

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

12. Joseph L. Stein
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that 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.

13. JOSEPH L. STEIN - Director

(Typed or printed name and capacity of person signing application)

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DEPT. OF STATE
RECEIVED

**STATE OF NEW JERSEY
DEPARTMENT OF THE TREASURY
DIVISION OF REVENUE AND ENTERPRISE SERVICES
SHORT FORM STANDING**

RENAISSANCE FITNESS & WELLNESS, INC.
0100703485

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic For-Profit Corporation was registered by this office on April 17, 1997.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and office are:

BORENSTEIN, MC CONNELL, CALPIN, P.C.
3 WERNER WAY, SUITE 230
LEBANON, NJ 08833



IN TESTIMONY WHEREOF, I have
hereunto set my hand and affixed
my Official Seal at Trenton, this
15th day of July, 2019

Elizabeth Maher Muoio
State Treasurer

Certificate Number : 6098972544

Verify this certificate online at

https://www1.state.nj.us/TYTR_StandingCert/ISP/Verify_Cert.jsp

RECEIVED
TOLSON'S OFFICE
JUL 16 2019

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