# L03000027129

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W03-20598

J. BRYAN JUL 2 4 2003

## TRANSMITTAL LETTER

- TO: Registration Section Division of Corporations		
SUBJECT: TDEAL FITUESS (Name of Limited Liability Company)		-
The enclosed Articles of Organization and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Name of Person)	<del>.</del>	
IDEAL FANESS (Firm/Company)	. <del>=</del> .	THIS JUL 17 IN 8: 49
2102 A South MACD, 1/ = (Address)		E. FLORIDA
Tampa F1 33629 = (City/State and Zip Code)	-	, O.
For further information concerning this matter, please call:		
TEFFREY at (873) 748-6 (Name of Person) (Area Code & Daytime Telepho	734 ne Number)	-

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 **MAILING ADDRESS:** 

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



### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

July 21, 2003

JEFFREY R. FINK IDEAL FITNESS 2102A SOUTH MACDILL TAMPA, FL 33629

SUBJECT: IDEAL FITNESS Ref. Number: W03000020598 MIS UL T MAN 19 TO THE TOTAL TOT

We have received your document for IDEAL FITNESS and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "Ltd. Co." "L.C." or "L.L.C."

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan Document Specialist

-Letter Number: 103A00042415

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: I DEAL FITUESS LLC
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address:  Mailing Address:
2102 South MACDILL AVE 2102 South MACDILL AVE SUITE A TAMPA F1 33629
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
TEFFREY R. FINK
2102A So Wh MACDill  Florida street address (P.O. Box NOT acceptable)
Tampa FL 33629 City, State, and Zip
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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, F.S  Registered Agent's Signature

Page 1 of 2

(CONTINUED)

### ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manager	Name and Address:
"MGRM" = Managing Member  MGR	Jeff Rey R. Fink 2102A South Madill Tompa F1 33629
-	
(Use attachment if necessary)	See Populario
NOTE: An additional article must be	added if an effective date is requested.
REQUIRED SIGNATURE:	

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

TEFFREY R- Fin Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)