

LO40000/2520

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

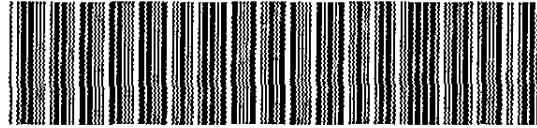
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700027626427

01/27/04--01028--023 **160.00

FILED

04 JAN 27 AM 8:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LO4-12520
CR



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

February 4, 2004

ANTHONY NOSTRO
16216 RAMBLING VINE
TAMPA, FL 33620

SUBJECT: PROHEALTH MARKETING, LLC
Ref. Number: W04000004915

We have received your document for PROHEALTH MARKETING, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on January 27, 2004. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days of your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline
Document Specialist

Letter Number: 404A00007587

RECEIVED
FLORIDA
JAN 27 2004

01 JAN 27 AM 8:59

FILED

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ProHealth Marketing, LLC
(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:

Anthony Nostro
(Name of Person)

ProHealth Marketing
(Firm/Company)

16216 Rambling Vine
(Address)

Tampa, Florida 33620
(City/State and Zip Code)

For further information concerning this matter, please call:

Tony Nostro at (813) 962-7914
(Name of Person) (Area Code & Daytime Telephone 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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 JAN 27 AM 8:59

FILED

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

ProHealth Marketing, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

16216 Rambling Vine

Tampa, FL 33620

Mailing Address:

16216 Rambling Vine

Tampa, FL 33620

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Anthony Nostro

Name

16216 Rambling Vine

Florida street address (P.O. Box NOT acceptable)

Tampa,

FLORIDA 33620

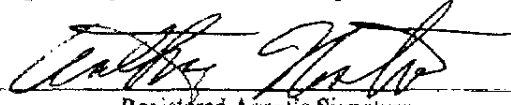
City, State, and Zip

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 JAN 27 AM 8:59

FILED

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, Florida Statutes..



Registered Agent's Signature

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

Anthony Nostro

16216 Rambling Vine

Tampa, FL 33620

MGRM

Craig Tingley

2687-F MacCollum Parkway

Kennesaw, GA 30144

(Use attachment if necessary)

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.)

Anthony Nostro

Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 JAN 27 AM 8:59

FILED

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)

ARTICLE V – Effective Date of Organization:

The Effective Date to commence business operations is:

FEB 17TH 2004
AN

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 JAN 27 AM 8:59

FILED