

L04000029101

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

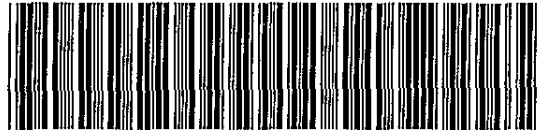
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600032189346

04/09/04--01038--008 **130.00

FILED
2004 APR -9 AM 8:56
BUREAU OF CORPORATION
TALLAHASSEE, FLORIDA

J. BRYAN APR 16 2004

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MARTIAL-FIT
(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:

Lauren Ann Moquin
(Name of Person)

MARTIAL-FIT
(Firm/Company)

2589 Orangewood Court
(Address)

Palm Harbor FL 34684
(City/State and Zip Code)

For further information concerning this matter, please call:

Lauren Moquin at (727) 781-2221
(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

FILED
2004 APR -9 AM 8:56
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

MARTIAL-FIT, LLC

ARTICLE II - Address:

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

Principal Office Address:

2589 Oranewood Court

Palm Harbor FL 34684

Mailing Address:

2589 Oranewood Court

Palm Harbor FL 34684

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

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

Lauren Moquin

Name

2589 Oranewood Court

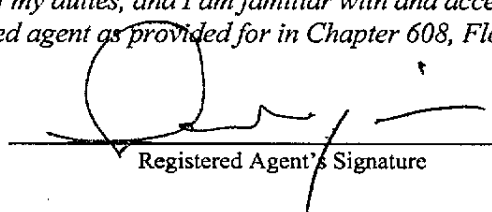
Florida street address (P.O. Box **NOT** acceptable)

Palm Harbor

FLORIDA

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, Florida Statutes..



Registered Agent's Signature

FILED
2004 APR -9 AM 8:56
JENNIFER L. HARRIS, CLERK
TALLAHASSEE, FLORIDA

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:

Manager

Lauren Ann Moquin

2589 Orangewood Court

Palm Harbor FL 34684

Managing Member

Shelly Moye

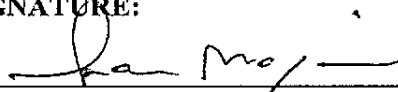
12749 W Hillsborough Ave, Ste A

Tampa FL 33635

(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.)

Lauren Moquin

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)

FILED
2004 APR -9 AM 8:56
JUDICIAL CORP. REGISTRARS
TALLAHASSEE, FLORIDA