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Division of Corporations

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From:

: RUDEN, MCCLOSKY, SMITH, SCHUSTER & RUSSELL, P.A. Account Name

Account Number : 076077000521 Phone

: (954)527-2428

Ex Number

: (954)764-4996

## LIMITED LIABILITY COMPANY

Fitness Funding, LLC

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T. Brumbley MAY 4 2005

## H050001129783

## ARTICLES OF ORGANIZATION OF FITNESS FUNDING, LLC a Florida Limited Liability Company

The undersigned, pursuant to the provisions of Chapter 688 of the Florida Statutes, for the purpose of forming a Limited Liability Company under the laws of the State of Florida do set forth the following:

- 1. <u>NAME</u>, The name of the Limited Liability Company is FITNESS FUNDING, LLC (the "Company").
- 2. MAILING AND STREET ADDRESS OF PRINCIPAL OFFICE. The mailing address for the Company is: 1545 North Park Drive, Suite 104, Weston, FL 33326.
- 3. REGIST ERED AGENT. The name and address of the initial registered agent in the State of Florida, whose Consent to Appointment as Registered Agent accompanies these Articles of Organization, is: David Ortiz, 1545 North Park Drive, Suite 104, Weston, FL 33326.

The undersigned has executed these Articles of Organization on the 3 day of May, 2005.

By:\_

David Ortiz, Authorized Representative

05 MAY -3 AM II: E SECRETARY OF STAL TALLAHASSEE, FLORE

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## CERTIFICATION OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESKINATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

- 1. The name of the limited liability company is: FITNESS FUNDING, LLC
- 2. The name and address of the registered agent and office is:

David Ortiz 1545 North Park Drive, Suite 104, Weston, FL 35326

Having been named as rigistered 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 its 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.

David Ortiz, Registered Agent

5/3/05 Date

> 05 MAY -3 AM II: 51 SECRETARY OF STATE