

# LOG0000 73528

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

06 JUL 24 PM 3:14

FILED

7/25/06  
[Signature]

**Get a Grip Gymnastics Center, LLC.**  
3790 Enchanted Oaks Lane  
Sebring, Florida 33875

July 19, 2006

Secretary of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

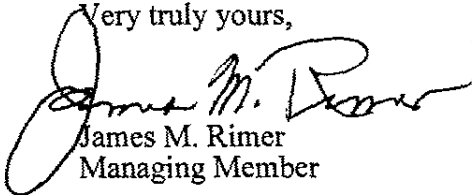
Re: Get a Grip Gymnastics Center, LLC.

Gentlemen:

Enclosed please find the original and one copy of Articles of Organization, together with my check in the amount of \$125.00.

This represents the cost of the Filing Fees, and Fee for Registered Agent Designation for the above named Limited Liability Company.

Very truly yours,

  
James M. Rimer  
Managing Member

FILED  
06 JUL 24 PM 3:14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION  
GET A GRIP GYMNASTICS CENTER, LLC  
A LIMITED LIABILITY COMPANY  
(Pursuant to Chapter 608, Florida Statutes)

1. NAME: The name of the limited liability company is GET A GRIP GYMNASTICS CENTER, LLC.

PURPOSE: The purpose of this member managed limited liability company may include the transaction of any and all lawful business for which limited liability companies may be organized in the state of Florida.

2. ADDRESS OF PRINCIPAL OFFICE: The street address of the principal office of the limited liability company is:

3790 ENCHANTED OAKS LANE, SEBRING, FL 33875

3. MAILING ADDRESS: The mailing address of the limited liability company is:

3790 ENCHANTED OAKS LANE, SEBRING, FL 33875

4. MANAGEMENT: The limited liability company is to be managed by one or more members and is, therefore, a member-managed company.

5. REGISTERED AGENT, REGISTERED OFFICE AND REGISTERED AGENT'S SIGNATURE: The name and the Florida street address of the registered agent is:

JAMES M. RIMER  
3790 ENCHANTED OAKS LANE  
SEBRING, FL 33875

*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.*

  
JAMES M. RIMER

6. EFFECTIVE DATE: The effective date of the limited liability company shall be the date of filing unless otherwise stated below:

AUGUST 1, 2006

  
JAMES M. RIMER, MANAGING MEMBER

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

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SECRETARY OF STATE  
PALM BEACH, FLORIDA

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