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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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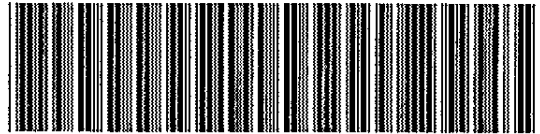
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VALIDATION ONLY

Requestor's Name

Address

City

State

Zip

Phone

CORPORATION(S) NAME

BCB PERSONAL TRAINING, LLC

☐ Profit

☐ NonProfit

☐ Amendment

☐ Merger

☐ Foreign

☐ Dissolution

☐ Mark

☐ Limited Partnership

☐ Annual Report

☒ Other

LLC

☐ Reinstatement

☐ Reservation

☐ Change of Registered Agent

☒ Certified Copy

☐ Photo Copies

☐ Certificate Under Seal

☐ Call When Ready

☐ Call If Problem

☐ After 4:30

☒ Walk In

☐ Will Wait

☒ Pick Up

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Name

Availability

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Examiner

Updater

Verifier

Acknowledgment

W.P. Verifier



Empire Toll Free: 1-800-432-3028

ARTICLES OF ORGANIZATION

We, the undersigned, hereby associate ourselves together for the purpose of becoming organized under the laws of the State of Florida, Chapter 608, and petition the Secretary of State for approval of such organization under the following proposed Articles of Organization.

ARTICLE I

Name

The name of the Limited Liability Company shall be **BCB Personal Training, LLC**.

ARTICLE II

Purpose

The purpose for which this Limited Liability Company is organized is as follows:

To engage in all activities not unlawful under the laws of the United States and the State of Florida.

To purchase, take, receive, lease or otherwise acquire, own, hold, improve, use, and otherwise deal in and with real or personal property or any interest therein, wherever situated.

To sell, convey, mortgage, pledge, create a security interest in, lease, exchange, transfer, and otherwise dispose of all or any part of its property and assets.

To lend money to, and use its credit to assist its manager(s) and employees in accordance with the laws of the State of Florida.

To purchase, take, receive, subscribe for or otherwise acquire, own, hold, vote, use, employ, sell, mortgage, lend, pledge, or otherwise dispose of, and otherwise use and deal in and with, shares or other interests in, or obligations of, other domestic or foreign organizations, associations, partnerships, or individuals, or direct or indirect obligations of the United States or of any other government, state, territory, governmental district, or municipality or of any instrumentality thereof.

To make contracts and guarantees and incur liabilities, borrow money at such rates of interest as the organization may determine, issue its notes, bonds, and other obligations, and secure any of

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its obligations by mortgage or pledge of all or any of its property, franchise, and income.

To lend money for its organizational purposes, invest and reinvest its funds, and take and hold real and personal property as security for the payment of funds so loaned or invested.

To conduct its business, carry on its operations, and have offices and exercise the powers granted by this act within or without this State.

To elect or appoint managers of the organization and define their duties and fix their compensation.

To make and alter By-Laws, not inconsistent with its Articles of Organization or with the laws of this State, for the administration and regulation of the affairs of the Limited Liability Company.

To make donations for the public welfare or charitable, scientific, or educational purposes.

To transact any lawful business which the manger(s) shall find will be in aid of governmental policy.

To pay pensions and establish pension plans, profit sharing plans, stock bonus plans, stock option plans, and other incentive plans for all or any part of its manager(s).

To have and exercise all powers necessary or convenient to effect its purpose.

ARTICLE III

Principal Office

The mailing address and the street address of the initial principal office of the Limited Liability Company shall be 6885 20th Street, Suite #159, Vero Beach, Florida 32966.

ARTICLE IV

Management of Affairs

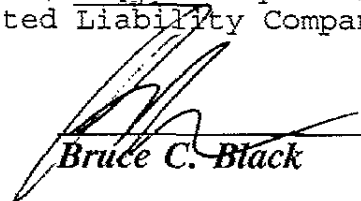
The affairs of the Limited Liability Company are to be managed by one (1) or more managers. The initial manager, and his address, is listed below. The Limited Liability Company is a manager-managed company.

The name and address of the individual who is to serve as the initial manager member is Bruce C. Black, 6885 20th Street, Suite #159, Vero Beach, Florida 32966.

ARTICLE V
Registered Agent

The Registered Agent for this Limited Liability Company shall be **Bruce C. Black**. The Registered Office of the Limited Liability Company shall be 6885 20th Street, Suite #159, Vero Beach, Florida 32966.

In Witness Whereof, the undersigned subscribing incorporator has hereunto set his hand and seal, this 2 day of Aug, 2006, for the purpose of forming this Limited Liability Company.



Bruce C. Black

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.

State of Florida
County of Palm Beach

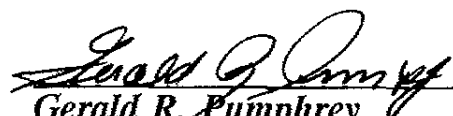
The foregoing instrument was acknowledged before me this 2 day of Aug, 2006, by **Bruce C. Black**, who is personally known to me, or has produced FL. Drivers License (type of i.d.) as identification.

Witness my hand and official seal in the County and State last aforesaid this 2 day of Aug, 2006.



Gerald R. Pumphrey
My Commission DB181785
Expires April 12, 2007

(Seal)



Gerald R. Pumphrey
Notary Public
My Commission Expires:

***Certificate of Designation
Registered Agent/Registered Office***

Pursuant to the provisions of Article 608, Florida Statutes, the undersigned Limited Liability Company, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the Limited Liability Company is:

BCB Personal Training, LLC

2. The name and address of the Registered Agent and his address is: Bruce C. Black, 6885 20th Street, Suite #159, Vero Beach, Florida 32966

Signature: _____

Bruce C. Black

Date: Aug 2, 2006

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.

Signature: _____

Bruce C. Black

Date: Aug 2, 2006