

LO7000044398

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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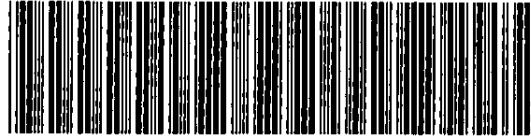
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/25/07--01023--019 **130.00

FILED
07 APR 25 AM 11:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NRC

TO: Registration Section
Division of Corporations

SUBJECT: Loftus Fitness LLC

The enclosed Articles of Organization and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Tod R. Smith
Kohl & Smith
150 Warren Circle
Jacksonville, FL 32259

For further information concerning this matter, please call:

Tod R. Smith at (904) 230-3200

Enclosed is a check for the following amount: \$130.00 Filing Fee and Certificate of Status

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF ORGANIZATION
OF
LOFTUS FITNESS LLC**

ARTICLE I - NAME

The name of the limited liability company is Loftus Fitness LLC

ARTICLE II - ADDRESS

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

Principal Office Address:

620 Acorn Court
St. Johns, Florida 32259

Mailing Address:

620 Acorn Court
St. Johns, Florida 32259

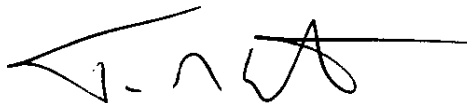
**ARTICLE III - REGISTERED AGENT,
REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE**

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

Tod R. Smith
150 Warren Circle
St. Johns, Florida 32259

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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..



Tod R. Smith

ARTICLE IV - MANAGERS OR MANAGING MEMBERS

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

Title:

"MGR" = Manager

"MGMR" = Managing Member

MGMR

Name and Address:

Lucy Loftus
620 Acorn Court
St. Johns, Florida 32259

REQUIRED SIGNATURE:



Lucy Loftus

(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.)

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