

L08000115469

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(Address)

(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

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B. KOHR

DEC 19 2008

EXAMINER

FILED
08 DEC -1 PM 1:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ELITE PERSONAL TRAINING LLC
(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:

WILLIAM SCOTT LASHINSKE
(Name of Person)

ELITE PERSONAL TRAINING LLC
(Firm/Company)

2468 US HWY 441/27 STE 201
(Address)

FRUITLAND PARK FL 34731
(City/State and Zip Code)

For further information concerning this matter, please call:

WILLIAM SCOTT LASHINSKE at 352 638 6799
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☒ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

FILED
08 DEC - 1 PM 1:25
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 2, 2008

WILLIAM SCOTT LASHINSKE
ELITE PERSONAL TRAINING LLC
2468 U.S. HIGHWAY 441/27, STE. 201
FRUITLAND PARK, FL 34731

SUBJECT: ELITE PERSONAL TRAINING, L.L.C.
Ref. Number: W08000053713

FILED
08 DEC -1 PM 1:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

L02-25543

We have received your document for ELITE PERSONAL TRAINING, L.L.C. and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$160.00 payment.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr
Regulatory Specialist II

Letter Number: 308A00058856

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SCOTT'S ELITE PERSONAL TRAINING, L.L.C.

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

2468 US HWY 441/27

STE 201

FRUITLAND PARK FL 34731

Mailing Address:

1112 WEST MAIN ST

UNIT H-5

LEESBURG FL 34748

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

WILLIAM SCOTT LASHINSKE

Name

1112 WEST MAIN ST UNIT H-5

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

LEESBURG FL 34748

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, F.S...


Registered Agent's Signature (REQUIRED)

(CONTINUED)

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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:

MGR

WILLIAM SCOTT LASHINSKE
1112 WEST MAIN ST UNIT H-5
LEESBURG FL 34748

MGRM

NICHOLE OVERLA
202 BROOKSTONE LANE
FRUITLAND PARK FL 34731

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.)

Nikki Overla

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)