

L09000112917

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

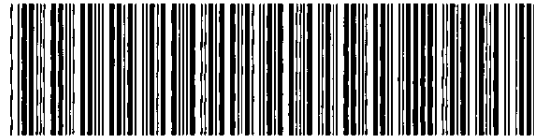
(Business Entity Name)

(Document Number)

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B. KOHR
NOV 25 2009
EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 198452 7518993

AUTHORIZATION

COST LIMIT: \$ 155.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
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ORDER DATE : November 24, 2009

ORDER TIME : 3:04 PM

ORDER NO. : 198452-005

CUSTOMER NO: 7518993

DOMESTIC FILING

NAME: MARTIAL ARTS CENTER OF APOLLO
BEACH, LLC

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

CONTACT PERSON: Kimberly Moret - EXT. 2949

EXAMINER'S INITIALS: _____

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DIVISION OF CORPORATIONS
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Martial Arts Center of Apollo Beach, LLC

(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:

6144 N US Highway 41
Apollo Beach, Florida 33572

Mailing Address:

6144 N US Highway 41
Apollo Beach, Florida 33572

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:

Eric C. Fleming c/o Owens Law Group, P.A.

Name

811-b Cypress Village Blvd.

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

Ruskin FL 33573

FL

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)

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:

MGRM

Gabriel Lucas Suarez-Solis

6144 N US Highway 41

Apollo Beach, Florida 33572

MGRM

Nathaniel Williams

6144 N US Highway 41

Apollo Beach, Florida 33572

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 11/24/2009 (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.)

ERIC C. FLEMING, AS AUTHORIZED REPRESENTATIVE
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)