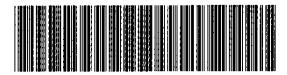
L1000063145

(Reques	stor's Name)	
(Addron	a)	
(Addres	S)	
(Addres	s)	
(City/Sta	ate/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(Busine	ss Entity Name)	,
(Donum)	ent Number)	
(Docum	ent Number)	
Certified Copies	Certificates of	Status
Special Instructions to Filing	Officer:	
,		
		ľ

Office Use Only



900181883849

06/11/19--01007--005 **160.00

FILED THE STATE

J. BRYAN

JUN 1 4 2010

EXAMINER

COVER LETTER

TO:	Registration S Division of Co		,	
SUBJ	ECT: FREE	FITNESS USA, LLC	ed Liability Company	
			ca zacinty company	
The en	closed Articles o	of Organization and fee(s) are	submitted for filing.	
Please	return all corresp	pondence concerning this mat	ter to the following:	
	MICHAEL .	J. BERMAN		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
			Name of Person	
		· · · · · · · · · · · · · · · · · · ·	Firm/Company	P.
	51// N SD	RINGS WAY		70 -
	3 144 N. 3F	KINGS WAT	Address	

	CORAL SP	RINGS, FLORIDA 3	3076 ty/State and Zip Code	
	herm4455@	bellsouth.net	sy/State and Zip Code	
	DOMITTOOL		for future annual report notification)	
For fu	rther information	concerning this matter, pleas	e call:	
MIC	HEAL BERN	MAN	_at (954) 540 - 870	5
	Name	of Person	Area Code & Daytime Telep	hone Number
Enclo	sed is a check for	or the following amount:		
□\$125	.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	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 Ci Tallahassee, FL 32301	ircle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
FREE FITNESS USA, LLC.	y Company, "L.L.C.," or "LLC.")
(Must end with the words "Limited Liabilit	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the print	ncipal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
5144 N. SPRINGS WAY CORAL SPRINGS, FL 33076	SAME
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	Office, & Registered Agent's Signature: red Agent. You must designate an individual or another
The name and the Florida street address of the re	gistered agent are:
MICHAEL J. BERMAN	
Name	
5144 N. SPRINGS WA	ess (P.O. Box <u>NOT</u> acceptable)
CORAL SPRINGS	FL_33076
City, Stat	e, 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)
Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

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

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MANAGER	MICHAEL J. BERMAN 5144 N. SPRINGS WAY CORAL SPRINGS, FL 33076
	
	
(Use attachment if necessary)	
CLE V: Effective date, if other than the effective date is listed, the date must be days after the date of filing.)	e date of filing: (OPTIONAL) be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	
Mule	2/13
Signature of a memb	er or an authorized representative of a member.
	ection 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury erein are true.)
of this document const that the facts stated he	stitutes an affirmation under the penalties of perjury

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

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)