

L11000008290

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

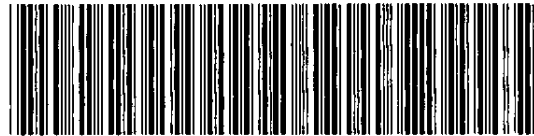
(Business Entity Name)

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VALIDATION ONLY

1/19/11

ROLANDO E. LEIVA, CPA

Requestor's Name

7400 SW 50 TERR #302

Address

MIAMI FL 33155

City

State

ZIP

Phone

(305) 663-1011

CORPORATION(S) NAME

SPORT-VITA, LLC

() Profit

() NonProfit

() Amendment

() Merger

() Foreign

() Dissolution

() Mark

() Limited Partnership

() Annual Report

(X) Other LLC

() Reinstatement

() Reservation

() Change of Registered Agent

() Certified Copy

() Photo Copies

() Certificate Under Seal

() Call When Ready

() Call If Problem

() After 4:30

(X) Walk-In

() Will Wait

(X) Pick-Up

() Mail Out

Name
Availability
Document
Examiner
Updater
Verifier
Acknowledgment
W.P. Verifier

Empire Toll Free: 1-800-432-3028

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Date: November 23, 2010.

ARTICLE I – NAME:

The name of the Limited Liability Company is:

SPORT-VITA, LLC

ARTICLE II – ADDRESS:

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

400 SOUTH POINT DRIVE, SUITE 1704
MIAMI BEACH, FLORIDA 33139

ARTICLE III – REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE:

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

ANDRE M. PLESSEL

Name

400 SOUTH POINT DRIVE, SUITE 1704

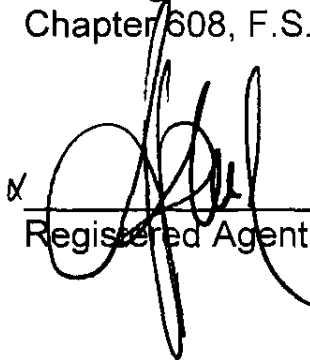
Florida Street Address

MIAMI BEACH, FL 33139

City, State, and Zip

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DIVISION OF CORPORATIONS
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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.

x 

Registered Agent's Signature

ARTICLE IV – MANAGEMENT

The Limited Liability Company is to be considered a multiple manager LLC and is therefore a MULTIPLE MANAGER LLC company.

The name and address of each initial MANAGER or MANAGER MEMBER is as follows:

Title:

Member/Manager

Name and Address:

ANDRE M. PLESSEL

400 S. POINT DRIVE, SUITE 1704

MIAMI BEACH, FLORIDA 33139

Member/Manager

OLIVER FREUND

CALLE FRONTON #14 089500

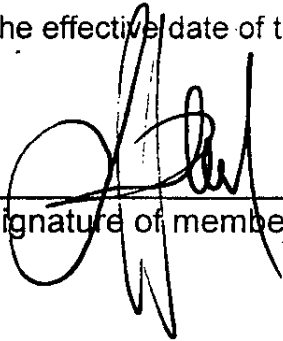
ESPLUGUES, BARCELONA, SPAIN

ARTICLE V - BUSINESS DEDUCTIONS

Per IRS regulations the corporation may pay and deduct the health insurance and medical expenses of its directors and employees. Additionally, business auto expenses may be reimbursed to directors and employees and thus deducted from current operations.

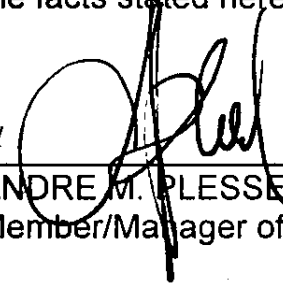
ARTICLE VI - EFFECTIVE DATE

The effective date of the Limited Liability Company shall be: JANUARY 20, 2011.

x 

Signature of 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

x 

ANDRE M. PLESSEL
Member/Manager of LLC

November 23, 2010