

L11000026270

Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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FLORIDA LIMITED LIABILITY CO.

oasis bodyworks central, llc

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

RECEIVED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Corporate Filing Menu

Help



March 1, 2011

FLORIDA DEPARTMENT OF STATE
Division of Corporations

EMPIRE

SUBJECT: OASIS BODYWORKS CENTRAL, LLC
REF: W11000011537

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Limited liability companies are either member-managed or manager-managed - not both. Member-managed companies are managed by the members of the limited liability company. Manager-managed companies are managed by non-members. Please amend your document to reflect either the limited liability company is member-managed or manager-managed. If the limited liability company is member-managed, list the names and addresses of the members who will manage the company and identify them solely as managing members. If the limited liability company is manager-managed, list the names and addresses of the non-members who will manage the company and identify them solely as managers. You cannot list both managers and managing members.

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) 245-6067.

Neysa Culligan
Regulatory Specialist II

FAX Aud. #: H11000053057
Letter Number: 411A00004988

P.O BOX 6327 - Tallahassee, Florida 32314

H11000053057

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

OASIS BODYWORKS CENTRAL, 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:

7043 NE 2ND AVENUE
MIAMI, FL 33138

Mailing Address:

7025 NE 2ND AVENUE
MIAMI, FL 33138

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:

JANUSZ NIEDBALA

Name

7025 NE 2ND AVENUE

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

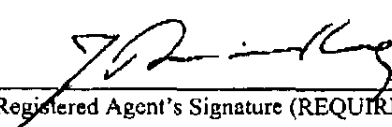
MIAMI

FL 33138

City, State, and Zip

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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.


Registered Agent's Signature (REQUIRED)

(CONTINUED)

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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

JANUSZ NIEDBALA

7025 NE 2ND AVENUE

MIAMI, FL 33138

(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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

JANUSZ NIEDBALA

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)

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Article VI
Indemnification

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To the fullest extent permitted under, in accordance with or not prohibited by the laws of the State of Florida, as amended from time to time, The Company shall indemnify and hold harmless each manager from and against any and all losses, claims, damages, liabilities or expenses of whatever nature, as incurred, arising out of relating the fact that such party was or is a manager of the Company. Notwithstanding the foregoing, no indemnification may be to or on behalf of a manager if a judgment or other final adjudication adverse to such manager establishes (1) that his or her acts were committed in bad faith or were the result active and deliberate dishonesty and were material to the cause of action so adjudicated, or (2) that he or she personally gained in fact a personal profit or other advantage to which he or she was not legally entitled.

IN WITNESS WHEREOF, the undersigned organizer has executed these Articles of Organization this 25th day of February, 2011.


Janusz Niedbala

Articles of Incorporation
Oasis Bodyworks Central, LLC

H11000053057