

L11000074152

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only

G. MCLEOD

JUN 27 2011

EXAMINER



300208265633

06/24/11--01018--013 \*\*160.00

FILED  
11 JUN 24 PM 3:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**GEORGE A. HELM, III, P.A.**  
**ATTORNEY AT LAW**

\* GEORGE A. HELM, III  
JOHN C.E. SUNG  
GEORGE W. BORING, III  
\* BRIAN B. BOLTON

Post Office Box 958464  
Lake Mary, FL 32795-8464  
Telephone (321) 832-1700  
FAX (321) 832-1701

MITZI L. PROTASEVICH, Paralegal  
TRACY S. MARSHALL, Paralegal

\* Florida Bar Board Certified  
Workers' Compensation Lawyer

RE: Cover Letter for Articles of Organization

TO: Registration Section  
Division of Corporations

SUBJECT: EXALTED FITNESS CONCEPTS, LLC

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

GEORGE A. HELM, III  
GEORGE A. HELM, III, P.A.  
P.O. BOX 958464  
LAKE MARY, FL 32795-8464  
GHELM@PELSUSA.COM

For further information concerning this matter please call:

GEORGE A. HELM, III at (321) 832-1700

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

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

**EXALTED FITNESS CONCEPTS, LLC**

**ARTICLE II – Address**

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

**Principal Office Address:**

720 Timberwilde Avenue  
Winter Springs, FL 32708

**Mailing Address:**


720 Timberwilde Avenue  
Winter Springs, FL 32708

**ARTICLE III – Registered Agent, Registered Office & Registered Agent's Signature:**

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

**GEORGE A. HELM, III  
615 CRESCENT EXECUTIVE COURT, 6<sup>TH</sup> FLOOR  
LAKE MARY, FL 32746**

*Having been named as registered agent and to accept service of processes for the above stated Limited Liability Company at the place designated in the 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 provided for in Chapter 608, F.S.*

  
\_\_\_\_\_  
Registered Agent's Signature (REQUIRED)

**(CONTINUED)**

**Page 1 of 2**

**FILED**  
**11 JUN 24 PM 3:10**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

**ARTICLE IV – Manager-Managed - The limited Liability Company shall be manager-managed and the initial manager names and address are:**

**TITLE**

"MGR" = Manager

"MGRM" = Managing Member

**NAME AND ADDRESS**

**MGR**

WILLIAM KENNETH BLACKBURN, III  
536 Remington Oak Drive  
Lake Mary, FL 32746

**MGR**

BRITTANI CAYLIN BLACKBURN  
536 Remington Oak Drive  
Lake Mary, FL 32746

**MGR**

RONALD JAMES MURRAY, II  
3450 Hillmont Circle  
Orlando, FL 32817

**MGR**

JAY STEVEN SALAMONE  
720 Timberwilde Avenue  
Winter Springs, FL 32708

**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.

**GEORGE A. HELM, III**

Type or printed name of signee