111000078689

(Re	questor's Name)	<u> </u>
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	<i>⇒#</i>)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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SECRETARY OF STATE
TALLAHASSEE, FLORID

D. BRUCE

JUL 0 8 2011

EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 24, 2011

BRADLEY R. MCNEFF 29643 BIRDS EYE DRIVE WESLEY CHAPEL, FL 33543

SUBJECT: RELENTLESS NUTRITION, LLC

Ref. Number: W11000034107

11 JUL -7 AM 9: 28
SECKETARY OF STATE
TALLAHASSEF, FI ORIDA

We have received your document for RELENTLESS NUTRITION, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on June 23, 2011. Please amend your document accordingly.

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) 245-6984.

Deborah Bruce - Regulatory Specialist II

Letter Number: 611A00015342

COVER LETTER

TO: Registration	n Section Corporations		
	·		
SUBJECT: Rele	entless Nutrition, LLC		
	Name of Limited	Liability Company,	
The enclosed Articles	s of Organization and fee(s) are sub	mitted for filing.	
Please return all corre	espondence concerning this matter t	to the following:	
D	D. M.N. S		
Bradley	R. McNeff	ime of Person	
	IND	ance of a croon	
Relentle	ess Nutrition, LLC.		
	Fi	rm/Company	
29643 E	Birds Eye Drive		$\vec{\mathbf{A}}_{c}$
		Address	<u> </u>
			AFE A
Wesley C	Chapel, FL 33543	note and The Cod-	SSE -
hradimt@	-	tate and Zip Code	TOP ME IT
bradimile	gmail.com E-mail address: (to be used for i	uture annual report notification)	<u> </u>
For further information	on concerning this matter, please ca	lt:	28 RIDA
Bradley McNef	ff	778-7546	
Nar	ne of Person	Area Code & Daytime Telep	hone Number
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 Court Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company	y is:	
Relentless Nutrition, LLC.		
(Must end with the words "Limited I	Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of th	ne principal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
29643 Birds Eye Drive Wesley Chapel, FL 33543	29643 Birds Eye Drive Wesley Chapel, FL 33543	
(The Limited Liability Company cannot serve as its own F business entity with an active Florida registration.) The name and the Florida street address of the Karyn Glubis No. 20617 Whitewood Florida street Tampa	ASSET OF THE PARTY	

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..

(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 "MGRM" = Managing Member	Name and Address:
MGR	Bradley McNeff 29643 Birds Eye Drive Wesley Chapel, FL 33543
MGRM	Betty McNeff
	29643 Birds Eye Drive Westev Chapel, FL 33543
(Use attachment if necessary) ICLE V: Effective date, if other than the effective date is listed, the date must	
ICLE V: Effective date, if other than the effective date is listed, the date must	te date of filing: (OPTIONAL) be specific and cannot be more than five business days prior
ICLE V: Effective date, if other than the effective date is listed, the date must 90 days after the date of filing.) REQUIRED SIGNATURE:	
ICLE V: Effective date, if other than the effective date is listed, the date must 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a memil (In accordance with section 60 constitutes an affirmation und I am aware that any false info constitutes a third degree felo	be specific and cannot be more than five business days prior ber or an authorized representative of a member. 08.408(3), Florida Statutes, the execution of this document ber the penalties of perjury that the facts stated herein are true. ormation submitted in a document to the Department of States any as provided for in s.817.155, F.S.)
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