## 111000105298

(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:
W1100034852

Office Use Only



700209116277

06/27/11--01004--015 \*\*43.75

08/24/11--01018--001 \*\*106.25



D. BRUCE SEP 14 2011

**EXAMINER** 



August 24, 2011

MAURICE BRUTON 5908 NW 71ST AVE TAMARAC, FL 33321

SUBJECT: STRENGTH TONING AND ENDURANCE BY MAURICE, LLC

Ref. Number: W11000034852

We have received your document for STRENGTH TONING AND ENDURANCE BY MAURICE, LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please accept our apology for failing to mention this in our previous letter.

The converting Florida entity must be active on our records.

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: 611A00019817



#### **COVER LETTER**

TO: Registration Section **Division of Corporations** 

### SUBJECT: Strength Toning and Endurance by Maurice Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Maurice Bruton	Name of Person			
Strength Toning and Er				
	Firm/Company			
5908 NW 71 Avenut				
	Address			
Tamarac,Florida 33321		<u> </u>		
Ci	ity/State and Zip Code	L A	S	
Strengthtoning@hotmail.com		<u> </u>	<u>. [6</u>	i i
For further information concerning this matter, please	for future annual report notification) se call:	ARY OF SSEE.	13 13	
Maurice Bruton	at 754 ) 366-1199	FLO	င်း	
Name of Person	Area Code & Dayume Telephone Number	STATE	-	
Enclosed is a check for the following amount:				
\$125.00 Filing Fee Status  Status	S155.00 Filing Fee & S160.00 Filing Certificate of Certified Copy (additional copy is enclosed) Certified Copy (additional copy	f Status & py		
Mailing Address	Street/Courier Address			

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

#### September 13, 2011

TO: Debbie Bruce

RE: New LLC registration and Overpayment

FROM: Maurice Bruton

754 366-1199

At this present time, I have no intentions in reinstating as a corporation with the state of Florida, therefore proceed with LLC registration process. Please send the overpayment of \$20.00 to 5908 NW 71 Ave, Tamarac, Florida 33321. Please contact me if there are any more questions or concerns. Thank you.

m

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

#### **ARTICLE 1 - Name:**

The name of the Limited Liability Company is:

#### Strength Toning and Endurance by Maurice 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:	Mailing Address:	
5908 NW 71 Ave	5908 NW 71 Ave	
Tamarac, FL 33321	Tamarac, FL 33321	
(The Limited Liability Company cannot serve as its own Fousiness entity with an active Florida registration.)  The name and the Florida street address of to Maurice Bruton	ame Ti	SEP 13 PH
5908 NW 71 Avenue		
Florida stree	address (1.0. box 301 acceptable)	317.
Tamarac,	<sub>FL</sub> 33321	
City	y, State, 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: Title: "MGR" = Manager "MGRM" = Managing Member MGR Maurice Bruton 5908 NW 71 Avenue Tamarac, FL 33321 (Use attachment if necessary)

**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 talse information submitted in a document to the Department of State constitutes a third degree felony as provided for in 8.817.155, F.S.)

#### Maurice Bruton

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)

Page 2 of 2