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SECRETARY OF STATE

J. BRYAN

+EB 21 2012

**EXAMINER** 

# **COVER LETTER**

TO:	Registration Sec Division of Corp			
SUBJE	CT:	Platinum Name of Limi	Fitness LLC ted Liability Company	<u></u>
The end	closed Articles of (	Organization and fee(s) are	submitted for filing.	
Please r	eturn all correspon	ndence concerning this mat	tter to the following:	
		Gabr	relle M De Sant	75
		Platinum	Fitness LLC Firm/Company	FEB 20 P
	(	3230 Lak	eview Drive	PH 2: 34
-		West Palm	Beach, FL 3	3412
_	g	E-mail address: (to be used	for future annual report notification)	
For furt	her information co	oncerning this matter, pleas	e call:	
Gab	rielle M.	DeSantis Person	at ( 541 ) 358 — Area Code & Daytime Telep	0949 shone Number
		the following amount: \$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 C	ircle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLO	RIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:	ACCEPTANCE OF THE PARTY OF THE
Platinum Fit	
(Must end with the words "Limited Liability  ARTICLE II - Address:  The mailing address and street address of the prince	
Principal Office Address:	Mailing Address:
8220 Lakeview Drive	10130 Northlake Blvd

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:

Gabrielle M. Desantis

Name

8220 Lakeview Drive

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

West Palm Freach, FL 33412

City, 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)

# ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

"MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGR	Gabrielle M. DeSantis 8220 Lake VIEW Drive West Palm Beach, FC 33
	THE THE PERSON OF THE PERSON O
	EB 20 PA
	PA 2: 34
(Use attachment if necessary)	,
CLE V: Effective date, if other than the	date of filing: $\frac{2/\sqrt{(\varrho + 20)2}}{2 \text{ specific and cannot be more than five business days properties.}}$

## **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.)

constitutes a third degree felony as provided for in s.817.155, F.S.)

Gabrielle M. DeSantis

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)