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COVER LETTER

Registration Section,

TO:

Division of Corporations			
SUBJECT: Florida Fitness F	Professionals LLC		
SCBGECT:	ne of Limited Liability Comp		
	6 () 1 16 51		
The enclosed Articles of Organization and			
Please return all correspondence concerni	ng this matter to the following	; ;	
Norma F. Wathen			
	Name of Person		
Florida Fitness Prof	essionals LLC		
	Firm/Company		
11934 Fairway Lake	s Drive Suite 1		
	Address		
Fort Myers, FL 33913			
· · · · · · · · · · · · · · · · · · ·	City/State and Zip Code	;	
doug.wathen@comcast.	net (to be used for future annual rep	and and Granical	
	•	on nouncation)	
For further information concerning this ma	mer, please call:		
Norma Wathen	at (239	292-3086	
Name of Person	Area Code	& Daytime Telephone Number	
Enclosed is a check for the following a	mount:		
\$125.00 Filing Fee \$130.00 Filing Certificate of	L	py Certificate of Status &	
Mailing Address Registration Sec Division of Cor P.O. Box 6327 Tallahassee, FL	tion Registrati porations Division Clifton E 32314 2661 Exc	ourier Address on Section of Corporations uilding cutive Center Circle see, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	R	T	ľC	Ĭ	Æ	ĭ ~	N	am	e:

The name of the Limited Liability Company is:



Florida Fitness Professionals 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:
11934 Fairway Lakes Drive	11934 Fairway Lakes Drive
Suite 1	Suite 1
Fort Myers, FL 33913	Fort Myers, FL 33913

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:

Norma Wathen		TASE OF A
	三三十二	
11934 Fairway	y Lakes Drive Suite 1	27
Florida	street address (P.O. Box NOT acceptable)	등의 공 디
Fort Myers	_{FL} 33913	Post .
	City, State, and Zip	RIDA 5

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:

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Mer	nber
MGRM	Norma F. Wathen
	11934 Fairway Lakes Drive Suite 1
	Fort Myers, FL 33913
MGR	Brian K. Wathen
	12310 White Pine Lane
	Fort Myers, FL 33913
* 14 · 1 · 1 · 1 · 1 · 1 · 1 · 1 · 1 · 1	
	
(Use attachment if necessar	y)
ARTICLE V. Effective date if other	er than the date of filing: 4/25/12 . (OPTIONAL)
(If an effective date is listed, the da	te must be specific and cannot be more than five business days prior
to or 90 days after the date of filing	
REQUIRED SIGNATURE	E:
Day	100 7 11 al-l

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.)

Norma F. Wathen

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)