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Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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J. BRYAN

AUG 1 3 2012

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Darwin Fitness, L.L.C. 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:	
Jean-Sebastien Fabre Name of Person	
Firm/Company	.
Firm/Company 161 Crown Point Circle Address Longwood FL 32779 City/State and Zip Code	
Longwood FL 32779 City/State and Zip Code	
Carwin fita amail. com E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Jean-Sebastien Fabre at (407) 274-4747 Name of Person Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\ \times \text{S130.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{\$\text{S160.00 Filing Fee, Certified Copy (additional copy is enclosed)}}	
Mailing Address Registration Section - Registration Section	

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is: Darwin Fitness L.L.C. (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.") ARTICLE II - Address:
(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:
161 Crown Point Circle 161 Crown Point Circle Longwood FL 32779 Longwood FL 32779
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:
Jean-Sébastien Fabre Name
161 Crown Point Circle Florida street address (P.O. Box NOT acceptable)
Longwood FL 32779 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)

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:

"MGR" = Manager	
"MGRM" = Managing Member	
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