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(Req	uestor's Name)	
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EXAMINER

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, COVE	RLETTER
	<i>p</i>
TO: Registration Section Division of Corporations	
SUBJECT: 3-2-1 Fitness LLC	
Name of Limit	ted Liability Company
The enclosed Articles of Organization and fee(s) are	submitted for filing.
Please return all correspondence concerning this mat	tter to the following:
Charles Russell McKee	e .lr
Chance Haccon Worker	Name of Person
	Firm/Company
1201 River Reach Drive	
	Address
Fort Lauderdale, FL 33315	120
	ty/State and Zip Code
charley.mckee@gmail.com	ty/State and Zip Code
E-mail address: (to be used	for future annual report notification)
For further information concerning this matter, please	e call:
Charles McKee	202 0701222
Name of Person	at (203 9791322 77
Enclosed is a check for the following amount:	
✓ \$125.00 Filing Fee ■ \$130.00 Filing Fee &	\$155.00 Filing Fee & \$160.00 Filing Fee,
Certificate of Status	Certified Copy Certificate of Status & Certified Copy
	(additional copy is enclosed)
Malling Address	Street/Couries Adduses
Mailing Address Registration Section	Street/Courier Address Registration Section
Division of Corporations P.O. Box 6327	Division of Corporations
Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle
•	Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ABTICI	E T	3. 1	
ARTICL	LL	- N	un (c)

The name of the Limited Liability Company is:

3-2-1 Fitness 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:

1201 River Reach Drive, Apt. 506 Fort Lauderdale, FL 33315 1201 River Reach Drive, Apt. 506 Fort Lauderdale, FL 33315

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:

Dan Ochoa

Name

3301 NE 1st Ave, 1908

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

Miami

_{FL} 33137

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:

"MGRM" = Managing Member		
MGRM	Charles McKee	
	1201 River Reach Drive, Apt. 506	
	Fort Lauderdale, FL 33315	
MGRM	Nat Greene	
·· ·····	3613 Washington Road, Apt. 4	
	West Palm Beach, FL 33405	ۮٙ
MGRM	Dan Ochoa	구 -
Marini	0004.115.4.4.4.4.000	رن زر
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(Use attachment if necessary)		
ICLE V: Effective date, if other than	the date of filing: (OPTION	ALì
n effective date is listed, the date mus 90 days after the date of filing.)	t be specific and cannot be more than five business da	

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.)

Charles McKee

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)