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(Re	questor's Name)			
(Ad	dress)			
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PICK-UP	☐ WAIT	MAIL		
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SEUGETARY OF STATE
INITIALIASSEE FLORIDA

K. SALY EXAMINER SEP - 4 2013

COVER LETTER

то:	O: Registration Section Division of Corporations				
SUBJI	ECT: Venice I				
		Name of Limite	ed Liability C	Company	
The en	closed Articles o	f Organization and fee(s) are s	submitted for	filing.	
Please	return all corresp	ondence concerning this matte	er to the follo	wing:	
	Adam Miche	al Rosenthal			
			Name of Pers	on	
	Venice Fit Co	ompany			
			Firm/Compar	ıy	
	3181 NW 60	th Street			
			Address		
	Boca Raton,				
			y/State and Zip) Code	
	adammichea	Irosenthal@gmail.com E-mail address: (to be used f		al report notification)	
For fu	rther information	concerning this matter, please		,	
Adan	n Rosenthal		_{at (} 561	, 573 9888	
7.001		of Person		Code & Daytime Tele	phone Number
Enclo	sed is a check for	or the following amount:			
□\$125	.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certifie	•	\$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	Reg Div Clit 266	eet/Courier Address gistration Section vision of Corporations fton Building 11 Executive Center O lahassee, FL 32301	s

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	EFFECTIVE DATE 23-2013
Venice Fit Company, LLC	
(Must end with the words "Limited Liabil	ity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
Adam M. Rosenthal	Adam M. Rosenthal
3181 NW 60th Street	628 Indiana Avenue
Boca Raton, FL 33496	Venice, CA 90291
The name and the Florida street address of the real Adam M. Rosenthal Name	egistered agent are: SSEE F ORD SSEE F ORD
3181 NW 60th Street	
Florida street add	lress (P.O. Box NOT acceptable)
Boca Raton, FL 33496	FL
City, Sta	ate, and Zip
liability company at the place designated in the registered agent and agree to act in this capacall statutes relating to the proper and complete and accept the obligations of my position as regional acceptance. Adam Ma	accept service of process for the above stated limited his certificate, I hereby accept the appointment as ity. I further agree to comply with the provisions of e performance of my duties, and I am familiar with gistered agent as provided for Chapter 608, F.S

(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 "MGRM" = Managing Member	Name and Address:
MGR	Adam M. Rosenthal 3161 NW 60th Street Boca Raton, FL 33496
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than to (If an effective date is listed, the date multiplier to or 90 days after the date of filing.	the date of filing: August, 23 2013 (OPTIONAL) ust be specific and cannot be more than five business day
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.)

Adam M. Rosenthal

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)