## #13000/38867

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
· (Business Entity Name)
(Document Number)
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SECRETARY OF STATEM LAHASSEE, FLORIU

K.SALY EXAMINER OCT -2 2013 (850) 245-6051.

## **COVER LETTER**

то:	Registration Section Division of Corporations
SUBJE	Name of Limited Liability Company
The end	osed Articles of Organization and fee(s) are submitted for filing.
Please 1	eturn all correspondence concerning this matter to the following:
-	Robert Holley
	Seriou Exercise 1
	1800 Lale Anaha Blvd
•	Address
	Auburndale, F1, 33823
. 2° 7	City/State and Zip Code
For furt	ner information concerning this matter, please call:
<u>V</u>	Messa Holley at (863) 213-9031  Name of Person Area Code & Daytime Telephone Number
Enclos	ed is a check for the following amount:
\$125.	O Filing Fee Scritificate of Status  Certificate of Status & Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)
	Mailing Address Street/Courier Address

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

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:	
Serious Exercis (Must end with the words "Limited Liability	
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2011 Orleans Ave Laxeland Pl 33803	1800 Lake Arrana Bl Auburndale, Fl 33823
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)  The name and the Florida street address of the registration.	ered Agent. You must designate an individual or another
18/11 1 a 1/0 Av	Dana Rhyd SSE 2
1000 6000 711	1010 DIV(1 . DO 0

Blud

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..

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

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGLKM	Vanessa Holley 1800 Lake Arrana Blvd Aubumdale, Fl, 33823
•	the date of filing: (OPTIO)
LE V: Effective date, if other than fective date is listed, the date m or 90 days after the date of filing.	Hallun
rective date is listed, the date m or 90 days after the date of filing.  REQUIRED SIGNATURE:  Signature of a men constitutes an affirmation un I am aware that any false info	nber or an authorized representative of a member.  608.408(3), Florida Statutes, the execution of this document of the penalties of perjury that the facts stated herein are true. Formation submitted in a document to the Department of State lony as provided for in s.817.155, F.S.)

\$ 5.00 Certificate of Status (Optional)