

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L14000048766
FILED 8:00 AM
March 25, 2014
Sec. Of State
tbrown

Article I

The name of the Limited Liability Company is:

NORTH AUSTIN FITNESS PARTNERS, LLC

Article II

The street address of the principal office of the Limited Liability Company is:

204 S HOWARD AVE
TAMPA, FL. 33606

The mailing address of the Limited Liability Company is:

PO BOX 18203
TAMPA, FL. 33679

Article III

Other provisions, if any:

GROUP PERSONAL TRAINING AND FITNESS CLASSES

Article IV

The name and Florida street address of the registered agent is:

ANITA'S ACCOUNTING SOLUTIONS, PLLC
3314 HENDERSON BLVD SUITE 205
TAMPA, FL. 33609

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.

Registered Agent Signature: ANITA CAMACHO

Article V

The name and address of person(s) authorized to manage LLC:

Title: MGRM
TERRY BLACHEK
PO BOX 18203
TAMPA, FL. 33679

Title: MGR
TANG, LLC
8280 E TAILFEATHER DR
SCOTTSDALE, AZ. 85255

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Article VI

The effective date for this Limited Liability Company shall be:

03/20/2014

Signature of member or an authorized representative

Electronic Signature: TERRY BLACHEK

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.