

#L14000083249

(Requestor's Name)

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2014 MAY 14 PM 3:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER

MAY 22 2014

Law Offices of
STEVEN I. GREENWALD, P.A.

Boca Palm Professional Plaza
6971 North Federal Highway
Suite 105
Boca Raton, Florida 33487

e-mail: sigreenwaldlaw@att.net

Phone: 561.994.5560 ext 101
Fax: 561.994.5629

May 12, 2014

VIA FEDERAL EXPRESS
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Articles of Organization – Body and Soul Fitness of Boynton Beach, LLC

Dear Sir/Madam:

Enclosed please find this firm's check No. 1811 in the amount of \$125.00 representing the filing fee for Articles of Organization of Body and Soul Fitness of Boynton Beach, LLC. Please forward to this office a letter of acknowledgment once this has been processed.

Should you have any questions, please let us know.

Very truly yours,

A handwritten signature in cursive script that reads "Steven I. Greenwald" followed by a stylized flourish.

Steven I. Greenwald

SIG:mmm

Enclosures

cc: Laura Becraft (via email)

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BODY AND SOUL FITNESS OF ~~BOYNTON BEACH, LLC~~
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:

Steven I. Greenwald, Esq.

Name of Person

Law Offices of Steven I. Greenwald, P.A.

Firm/Company

6971 North Federal Highway, Suite 105

Address

Boca Raton, FL 33487

City/State and Zip Code

sigreenwaldlaw@att.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Steven I. Greenwald

Name of Person

at (561)

Area Code

994-5560

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$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

Street/Courier Address

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:

BODY AND SOUL FITNESS OF BOYNTON BEACH, 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:

8788 Boynton Beach Boulevard
Suite 109
Boynton Beach, FL 33472

Laura Becraft
8788 Boynton Beach Boulevard, Suite 109
Boynton Beach, FL 33472

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.)

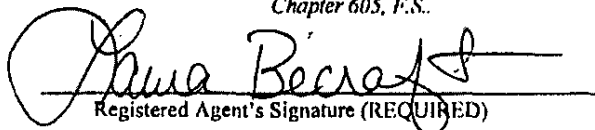
The name and the Florida street address of the registered agent are:

Laura Becraft
Name

8788 Boynton Beach Boulevard, Suite 109
Florida street address (P.O. Box NOT acceptable)

Boynton Beach FL 33472
City 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 605, F.S.


Registered Agent's Signature (REQUIRED)

(CONTINUED)

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2014 MAY 14 PM 3:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

Name and Address:

Laura Becraft

8788 Boynton Beach Boulevard, Suite 109

Boynton Beach, FL 33472

AMBR

Anthony Pellegrino

205 N.W. 134th Terrace, No. 103

Plantation, FL 3335


(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(In accordance with section 605.0203 (1) (b), 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.)

Laura Becraft

Typed or printed name of signer

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)