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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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SEP 1 7 2014

T. BROWN

COVER LETTER

Registration Section

Division of Corporations	•
SUBJECT:	Remain Fit LLC.
Name of L	imited Liability Company
The enclosed Articles of Organization and fee(s)	are submitted for filing.
Please return all correspondence concerning this	matter to the following:
Brian Thomas Langston	
	Name of Person
Remain Fit LLC.	
	Firm/Company
715 W Las Olas Blvd #1	
	Address
Fort Lauderdale, Florida 33312	
	City/State and Zip Code
blangston25@gmail.com E-mail address: (to be us	ed for future annual report notification)
For further information concerning this matter, pl	ease call:
Brian Thomas Langston at (Name of Person	954) 464 3821 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
☑ \$125.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & □\$160.00 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,

ARTICLES OF ORGANIZATION	FOR FLORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name:	
The name of the Limited Liability Company is:	FOR FLORIDA LIMITED LIABILITY COMPANY Remain Fit LLC mited Liability Company, "L.L.C.," or "LLC.")
	Remain Fit LLC mited Liability Company, "L.L.C.," or "LLC.")
•	
ARTICLE II - Address: The mailing address and street address of the princi	y
Principal Office Address:	Mailing Address:
715 W Las Olas Blvd #1	715 W Las Olas Blvd #1
Fort Laudordalo, Florida 22212	Fort Lauderdale, Florida 33312
FOIT Lauderdale, Florida 33312	
ARTICLE III - Registered Agent, Registered Of The Limited Liability Company cannot serve as its mother business entity with an active Florida regis	ffice, & Registered Agent's Signature: s own Registered Agent. You must designate an individual or stration.)
ARTICLE III - Registered Agent, Registered Of The Limited Liability Company cannot serve as its another business entity with an active Florida regis	ffice, & Registered Agent's Signature: s own Registered Agent. You must designate an individual or stration.) stered agent are:
ARTICLE III - Registered Agent, Registered Of The Limited Liability Company cannot serve as its another business entity with an active Florida regis. The name and the Florida street address of the regis. Brian Thomas Langston	ffice, & Registered Agent's Signature: s own Registered Agent. You must designate an individual or stration.) stered agent are:
ARTICLE III - Registered Agent, Registered Of The Limited Liability Company cannot serve as its another business entity with an active Florida regis. The name and the Florida street address of the regis. Brian Thomas Langston	ffice, & Registered Agent's Signature: s own Registered Agent. You must designate an individual or stration.) stered agent are:
ARTICLE III - Registered Agent, Registered Of The Limited Liability Company cannot serve as its another business entity with an active Florida regis. The name and the Florida street address of the regis. Brian Thomas Langston	ffice, & Registered Agent's Signature: s own Registered Agent. You must designate an individual or stration.) stered agent are: Name
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ny 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)

Page 1 of 2

<u>[itle:</u> AMBR" = Authorized Member	Name and Address:
MGR" = Manager	
MGR	Brian Thomas Langston
	715 W Las Olas Blvd #1
	Fort Lauderdale, FL 33312
Use attachment if necessary)	
ective date is listed, the date must be spe	of filing: (OPTIONAL) ecific and cannot be more than five business days prior to or 9
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E VI: Other provisions, if any. E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a mer (In accordance with section 66) constitutes an affirmation under I am aware that any false information constitutes a third degree felony. S125.00 Filing Fee for Articles of Org	mber or an authorized representative of a member. 5.0203 (1) (b), Florida Statutes, the execution of this document in the penalties of perjury that the facts stated herein are true, mation submitted in a document to the Department of State y as provided for in s.817.155, F.S.) Brian Thomas Langston Typed or printed name of signee
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ARTICLE IV-