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COVER LETTER

	stration Section ion of Corporations				
	MOPA FITNESS LLC				
SUBJECT: _	Name	of Limited Liab	pility Company		-
The enclosed	Articles of Organization and fe	e(s) are submitt	ed for filing.		
Please return a	all correspondence concerning	this matter to the	e following:		
P	ETER J. MUNSON, ESQUIRI	Ē			
Name of Person					
C	CLARK CAMPBELL LANCASTER & MUNSON, P.A.				
	Firm/Company				
50	500 S. FLORIDA AVENUE, SUITE 800				
Address					
L	AKELAND, FL 33801				
		City/State	and Zip Code		
pet	ramikeb@cs.com				
	E-mail address: (to b	e used for future	e annual report notificat	ion)	
For further info	rmation concerning this matter	, please call:			SSS SSS SSS SSS SSS SSS SSS SSS SSS SS
Pe	Peter J. Munson		647-5337		F
	Name of Person	Area Code		ne Number	PHIZ: 5
Enclosed is a	check for the following amoun	t:			~ -
\$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status		tus Cert	Certified Copy Certi (additional copy is enclosed) Certi		iling Fee, e of Status & Copy copy is enclosed)
	Mailing Address		Street Address		
Registration Section			Registration Section Division of Corporations		

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

OF

MOPA FITNESS LLC

The undersigned for the purpose of forming a limited liability company pursuant to Chapter 605, Florida Statutes, hereby make, acknowledge and file the following Articles of Organization.

ARTICLE I - NAME

The name of the limited liability company shall be MOPA FITNESS LLC.

ARTICLE II - PRINCIPAL PLACE OF BUSINESS AND ADDRESS

The principal place of business and the address of the Company in Florida shall be 502 Brannen Road, Lakeland, Florida 33811, and its mailing address is the same.

ARTICLE III - REGISTERED OFFICE AND AGENT

The name and street address of the registered agent of the Company in the State of Florida is Petra Beemer, 502 Brannen Road, Lakeland, Florida 33811.

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, Florida Statutes.

Petra Beemer, Registered Agent

ARTICLE IV – MANAGEMENT

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

TITLE

NAME AND ADDRESS

Manager

Petra Beemer 6741 Hayter Drive Lakeland, Florida 33803

Manager

Anitra Goddard 4212 Mulberry Road Plant City, Florida 33567

ARTICLE V - PURPOSES AND POWERS

The general purpose for which the Company is organized is to transact any lawful business for which a limited liability company may be organized under the laws of the State of Florida in connection therewith. The Company shall have all the powers granted to a limited liability company under the laws of the State of Florida.

ARTICLE VI - ADDITIONAL MEMBERS

The Members may admit to the Company additional Member(s) to participate the profits, losses, available cash flow, and ownership of the assets of the Company on such the are determined by all of the Members, (ii) admission of any such Additional Member(s) requires the written consent of all Members, and (iii) any Additional Members are allocated gain, loss, income or expense by the method provided in these Regulations, and if no method is specified, then as may be permitted by Section 706(d) of the Code.

ARTICLE VII - CONTINUATION OF BUSINESS

On the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member, or the occurrence of any other event that terminates the continued membership of a member in

the limited liability company, the remaining members shall have the right to continue the business on unanimous consent of the remaining members.

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.)

PETRA BEEMER, Manager

ANITRA GODDARD

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