

# L15000093477

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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**FLORIDA LIMITED LIABILITY CO.  
VIP FITNESS CENTER USA LLC.**

Certificate of Status	1
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TALLAHASSEE, FLORIDA

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May 28, 2015

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

LAZARUS

SUBJECT: VIP FITNESS CENTER USA LLC  
REF: W15000037527

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tim Buroh  
Regulatory Specialist II

FAX Aud. #: H15000126924  
Letter Number: 315A00011165

RECEIVED  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION**  
**FOR**  
**FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is: *(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")*

VIP FITNESS CENTER USA LLC.

**ARTICLE II - Address:**

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

5511 NW 72 AVE.  
Doral FL 33106

**ARTICLE III - Registered Agent, Registered Office:**

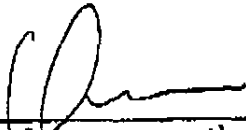
The name and the Florida street address of the registered agent are: *(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)*

Villalba Investment Corp.  
5511 NW 72 ave  
Doral FL 33106

**ARTICLE IV-**

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

Luigi Scutaro (AMBR)

Required Signatures:

\* 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.



Typed or printed name of signee

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)