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Division of Corporations

**Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850) 617-6381

From:
Account Name : SHUMAKER, LOOP & KENDRICK LLP
Account Number : 075500004387
Phone : (813) 229-7600
Fax Number : (813) 229-1660

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: mrobbins@clk-law.com

**FLORIDA LIMITED LIABILITY CO.
FITLIFE FOODS SOUTH FLORIDA, LLC**

Certificate of Status	0
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Page Count	01
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TALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION
OF
FITLIFE FOODS SOUTH FLORIDA, LLC**

ARTICLE I – Name:

The name of the Limited Liability Company is FITLIFE FOODS SOUTH FLORIDA, LLC.

ARTICLE II – Address:

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

1511 N. Westshore Boulevard
Suite 700
Tampa, Florida 33607

ARTICLE III – Registered Agent and Office

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

Michael H. Robbins
101 E. Kennedy Boulevard
Suite 2800
Tampa, Florida 33602

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.



Signature of Registered Agent

SECRETARY OF STATE
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ARTICLE IV -- Management

The name, title and address of the person authorized to manage and control the Limited Liability Company is:

Title	Name and Address
MGR	David Osterweil 1511 N. Westshore Boulevard Suite 700 Tampa, Florida 33607

IN WITNESS WHEREOF, I have signed these Articles of Organization as an authorized representative of a member and acknowledged them to be my act this 11th day of August 2015.



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 section 817.155, Florida Statutes)

David Osterweil

Typed or printed name of signee

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