Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000057135 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019

Phone : (305)552-5973 Fax Number

: (305)675-5944

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

Cmail	Addroce	

FLORIDA LIMITED LIABILITY CO.

CANALES FITNESS'LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$139.00

MAR - 7 2016

S. GILBERT

Electronic Filing Menu Corporate Filing Menu

Help

H16000057135

ARTICLES OF ORGANIZATION FOR RIDA LIMITED LIABILITY COMPANY

RTICLE I - Name:
ne name of the Limited Liability Company is: (Musical with the words Limited Liability Company LC. 70-1260)
CANALES FITNESS LLC
RTICLE II - Address:
he mailing address and street address of the principal office of the Limited Liabilit
ompany is: 19900 SW 8300 AVE
Miami, FL 33189
MUMI ITE STORY
RTICLE III - Registered Agent, Registered Office:
The name and the Florida street address of the registered agent are: (The Limited Liab Company connut serve as its own Registered Agent. You must designate an individual or another business e
vith an active Florida registration.)
Alvaro R. CANAles
19900 SW 83" Ave
Miami, FL 33189
ARTICLE IV- The name and title of each person authorized to manage and control the Limited
Liabilia: Company
Aluaco R. Lawales (AMBR)
HVO C
en e

H16000057135

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.

Alvaro L. Canales
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 (REOURED)

Page 2 of 2