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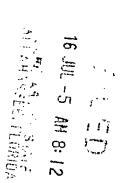
(Re	equestor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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JUL / 2017

COVER LETTER

TO:	Registration Division of (i Section Corporations		
SUBJE	ECT: <u>SWFL</u>	Strength & Conditioning LI Name of Lir	LC nited Liability Company	
The en	closed Articles	of Organization and fee(s) a	re submitted for filing.	
Please	return all corre	spondence concerning this m	natter to the following:	
	Craig No	orling		
			Name of Person	
	SWFL S	trength & Conditioning LLC		
			Firm/Company	
	<u>8341 W</u>	niskey Preserve Circle #54	.0	
			Address	
	Fort Mye	ers, FL 33919		
		(Tity/State and Zip Code	
_SV	vflsc@gmail.c	com E-mail address: (to be use	d for future annual report notifies	ation)
For fur	ther informatio	on concerning this matter, ple	ase call:	
<u>Craig</u>	Norling Nar	me of Person at (_	239) <u>691-3764</u> Area Code Daytime Te	tephone Number
		or the following amount:	_	
3 \$ 125.0	0 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
		illing Address	Street/Courier Add	<u>ress</u>
	Reg	gistration Section	Registration Section	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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A Comment	AN 8: 12

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

SWFL Strength & Conditioning LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LEC.")

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
8341 Whiskey Preserve Circle #540 Fort Myers, FL 33919	8341 Whiskey Preserve Circle #540 Fort Myers, FL 33919

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(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.)

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

Rebecca Goff	
Nar	ne
8341 Whiskey Preserve Cir	cle, 540
Florida street address (P.O. B	ox NOT acceptable)
Fort Myers	FL 33919
City	Zip

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 (RIOUILED)

(CONTINUED)

Page 1 of 2

<u>Fitle:</u> 'AMBR" = Authorized Member	Name and Address:
'MGR" = Manager	
MGR	Craig Norling
	8341 Whiskey Preserve Circle #540
	Fort Myers, FL 33919
MGR	Rebecca Goff
· · · · · · · · · · · · · · · · · · ·	8341 Whiskey Preserve Circle #540
	Ft. Myers, FL 33919
Use attachment if necessary)	
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E V: Effective date, if other than the date ctive date is listed, the date must be sp f filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a not constitutes an affirmation under the constitutes are affirmati	enter or an authorized representative of a member. 25.0203 (2007) Florida Statutes, the execution of this document or the penalties of perjury that the facts stated herein are true.
EV: Effective date, if other than the date ctive date is listed, the date must be sp f filing.) EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a man (In accordance with section 60 constitutes an affirmation und I am aware that any false information of the control of the constitutes are affirmation und I am aware that any false information und I am aware that I am aware	pecific and cannot be more than five business days prior to or 90 certain and cannot be more than five business days prior to or 90 certain authorized representative of a member.
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\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

SWFL Strength & Conditioning LLC 8341 Whiskey Preserve Circle #540 Fort Myers, FL

INITIAL LIST OF MEMBERS

The following named person(s) shall constitute the initial members of SWFL Strength & Conditioning LLC:

Craig Norling 8341 Whiskey Preserve Circle #540 Fort Myers, FL 33919

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Rebecca Goff 8341 Whiskey Preserve Circle #540 Ft. Myers, FL 33919

Craig Norling Organizer

<u>4/28/16</u>