## 117000254058

| (Requestor's Name)                      |
|---|
| (Address)                               |
| (Address)                               |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Document Number)                       |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
|   |
|   |
|   |
|   |

Office Use Only

WNW 59742

NOV 0 9 2017

T. SCOTT



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## FLORIDA DEPARTMENT OF STATE Division of Corporations

November 9, 2017

MICHELLE DUET PHILLIPS C/O GANO KOLEV, P.A. 1627 US HWY 92 W ABURNDALE, FL 33823

SUBJECT: PODIUM STRENGTH AND PERFORMANCE, LLC

Ref. Number: W17000089742

We have received your document for PODIUM STRENGTH AND PERFORMANCE, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Principal place of business must be a street address.,

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tyrone Scott
Regulatory Specialist II
New Filings Section

Letter Number: 717A00022762

## COVER LETTER

|                | ew Filing Section<br>ivision of Corporations   |   |
|----------------|--|---|
| SHIP I DOT     | Podium Strength and Performance, Ll  | I.C   |
| SOBJEC, I      | : Name of Lin  | nited Liability Company   |
| The enclos     | ed Articles of Organization and fee(s) are   | submitted for filing.   |
| Please retu    | rn all correspondence concerning this ma   | itter to the following:   |
|                | Michelle Duet Phillips   |   |
|                |  | Name of Person  |
|                | e/o Gano Koley, P.A.   |   |
|                |  | Firm Company  |
|                | 1627 US Hwy 92 W   |   |
|                | •  | Address   |
|                | Auburndale, F1, 33823  |   |
|                | ்<br>mimi.mmx@gmail.com  | ity State and Zip Code  |
| •              | E-mail address; (10 be used  | for future annual report notification)  |
| For further in | nformation concerning this matter, please  | eall:   |
|                | Michelle Duet Phillips 91  | 9 923-3208  |
|                | Name of Person At  | ea Code Daytime Telephone Number  |
| Enclosed is    | a check for the following amount:  |   |
|                | -  | \$155.00 Filing Fee & S160.00 Filing Fee, Certified Copy Certificate of Status & Cadditional copy is enclosed) Certified Copy (additional copy is enclosed) |
|                | Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314 | Street Address New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle  |
|                |  | Tallahassee, F1, 32301  |

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| Podium Strength and Performance, LLC                             |   |
|--|---|
| (Must contain the words "Limited Liab                            | thty Company, "L.4.,C.," or "FT.C.")              |
| CTICLE II - Address:   |   |
| a mailing address and street address of the principal office     | of the Limited Liability Company is:              |
|  |   |
|  |   |
| Principal Office Address:  | Mailing Address:                                  |
| •  |   |
| Principal Office Address:  1627 US Hwy 92 W Auburndale, FL 33823 | Mailing Address:  P.O. Box 120  Oldamar, FL 34677 |

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

Gano Koley, P.A. 1627 US Hwy 92 W Florida street address (P.O. Box NOT acceptable) Auburndale 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. Thereby 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, FS

(CONTINUED)

|  | Name and Address:   |
|--|---|
| AMBR" = Authorized Member  |   |
| MGR" = Manager   | Adiabatha Duar Bhillin  |
| AMBR   | Michelle Duet Phillips  |
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| tive date is listed, the date mus<br>filing.)  | the date of filing: January 1, 2018 (OPTIONAL)  t be specific and cannot be more than five business days prior to or 90  es not meet the applicable statutory filing requirements, this date will not   |
| tive date is listed, the date mus<br>filing.)<br>he date inserted in this block do<br>ent's effective date on the Depa<br>VI: Other provisions, if any,<br>any shall file annual reports and<br>for the last 3 years. The addition   | t be specific and cannot be more than five business days prior to or 90 as not meet the applicable statutory filing requirements, this date will not  |
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| tive date is listed, the date musfiling.) ne date inserted in this block doent's effective date on the Depa VI: Other provisions, if any, any shall file annual reports and for the last 3 years. The addition ber/Manager's authority and rise.  EQUIRED SIGNATURE:  Signature This document is I am aware that a constitutes a third | es not meet the applicable statutory filing requirements, this date will not retirent of State's records.  Reep at its principle address records including tax returns and financial not any Member/Manager will require amendments to these Articles to ghts. See attachment for further provisions.  Level 1  |
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ARTICLE IV-