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(Requestor's Name)
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-
(Business Entity Name)
(Document Number)
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SECRETARY OF SAGE

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COVER LETTER

TO:	New Filing So Division of C		*:	÷	
SHIRI	HCT. INTENSE	MUSCLE TRAINING FA	ACILITY, LLC.		
.,()1)		(Name of Res	ulting Florida Limited Co	mpany)	_
				nd fees are submitted to accordance with s. 605.1	
Please	e return all corre	espondence concerning	g this matter to:		
JAVII:	ER SUAREZ				
		(Contact Person)			
INTE	SE MUSCLE TR	AINING FACILITY, LLC	•		720
		(Firm/Company)			
13427	SW 131 STREET				1 1 1
		(Address)	 -		JUL 29 CRETARY LAHASSE
MIAN	II, FL 33186				2019 JUL 29 PH 3: 03 SECRETARY OF A LIGHT
	((City, State and Zip Code)			ن آب الله
jay@	imterossfit.com	į.			<u> </u>
H-i	nail Address: (to b	e used for future annual re	port notifications)		
For fu	irther information	on concerning this ma	tter, please call;		
JAVII	ER SUAREZ		at (305) 2	33-9348	
	(Name of Conta	ct Person)	_ `	ytime Telephone Number)	_
		or the following amou a bank located in the		ssed by this office must l	be payable in US
(\$25 ft & \$12.	50.00 Filing Fees or Conversion 5 for Articles anization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing Fees and Certified Copy	☐\$185.00 Filing Fees. Certified Copy, and Certificate of Status	
New Divis Clifto	EET ADDRESS Filing Section ion of Corporat on Building Executive Cent	ions	MAILING : New Filing ! Division of O P. O. Box 6: Tallahassee.	Section Corporations 327	

Tallahassee, FL 32301

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

The Articles of Conversion and attached Articles of Organization are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: INTENSE MUSCLE TRAINING FACILITY, INC.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a CORPORATION (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
FLORIDA First organized formed or incorporated under the laws of
First organized, formed or incorporated under the laws of
06/28/2007
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: INTENSE MUSCLE TRAINING FACILITY, LLC.
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 1/29/19 [The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after the date this document is filed by the Florida Department of State.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the locument's effective date on the Department of State's records.
5. The plan of conversion has been approved in accordance with all applicable statutes.

6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to

which such members are entitled under ss. 605,1006 and 605,1061-605,1072, F.S.

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SECRETARY OF PARTY
ALLIAHASSEE TO PARTY

Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign.

If Florida General Partnership or Limited Liability Partnership:

Signature of one General Partner.

If Florida Limited Partnership or Limited Liability Limited Partnership:

Signatures of ALL General Partners.

All others:

Signature of an authorized person.

Fees:

Articles of Conversion: \$25.00 Fees for Florida Articles of Organization: \$125.00

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ine maine of	- Name: the Limited Liability Company	vis:	
INTENSE MUS	SCLE TRAINING FACILITY, LLC		
	(Must contain the words "Limited La	ability Company, "L.L.C.," or "LLC,")	
ARTICLE I		e principal office of the Limited	I Liability Company is:
² rincipal Of	fice Address:	Mailing Address:	
13427 SW 131	STREET	13427 SW 131 STREET	
MIAMI, FL 33	186	MIAMI, FL 33186	
The Limited Liab business entity v		ered Office, & Registered Age Registered Agent. You must designate an in the registered agent are:	ndividual or another
The Limited Liab business entity v	bility Company cannot serve as its own F with an active Florida registration.) d the Florida street address of t JAVIER SUAREZ	Registered Agent. You must designate an i	ndividual or another
The Limited Liab business entity v	bility Company cannot serve as its own F vith an active Florida registration.) d the Florida street address of t JAVIER SUAREZ N 13427 SW 131 STREET	Registered Agent. You must designate an in he registered agent are:	ndividual or another
The Limited Liab business entity v	bility Company cannot serve as its own F vith an active Florida registration.) d the Florida street address of t JAVIER SUAREZ N 13427 SW 131 STREET	Registered Agent. You must designate an in	ndividual or another
The Limited Liab business entity v	bility Company cannot serve as its own F vith an active Florida registration.) d the Florida street address of t JAVIER SUAREZ N 13427 SW 131 STREET	Registered Agent. You must designate an in he registered agent are:	SECAETARY OF TALL AHASSEE.

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 (RÉQUIRED)

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JAVIER SUAREZ

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

Title:	Name and Address:	
"AMBR" = Authorized Member "MGR" = Manager		
AMBR	JAVIER SUAREZ	
117772	13427 SW 131 STREET	
	MIAMI, FL 33186	
AMBR	JADE GARCIA	
	13427 SW 134 STREET	
	MIAMI, FL 33186	
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(Use attachment if necessary)	SELECTION OF STEEL FLORING	2
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CLE V: Other provisions, if any.		Č
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REQUIRED SIGNATURE: //	////	
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/ (XE	\$\frac{1}{2}\land{\text{\tin}\text{\tex{\tex	
Signature of a member or	an authorized representative of a member	
This document is executed in accordance	e with section 605.0203 (1) (b), Florida Statutes, I am aware that	
	iment 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

Filing Fees

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)