11/13/2020



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From:

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# FLORIDA LIMITED LIABILITY CO. FITNESS 4LIFE CONSULTING LLC

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### ARTICLES OF ORGANIZATION

OF

## FITNESS 4LIFE CONSULTING LLC

# A Florida Professional Limited Liability Company

## ARTICLE I

#### NAME

The name of this Professional Limited Liability Company is FITNESS 4LIFE CONSULTING LLC (the "Company").

# ARTICLE II

### ADDRESS

The mailing address of the professional Limited Liability Company is:

1270 Wildwood Lakes BLVD - Naples, PI 34104

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

1270 Wildwood Lakes BLVD - Naples, Fl 34104

# ARTICLE III

# DURATION

The company's existence shall commence the acceptance of the Articles of Organization by the Secretary of State of Florida and shall continue in existence until the expiration of fifty (50) years from such commencement date, unless sooner terminated, liquidated, or dissolved by law or by the unanimous consent of the Members.

HTNESS 41.6FE CONSULTING LLC 1270 Wildwood Lakes BL/VO Naples, 9134104 (786)471-1827



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## ARTICLE IV

#### MANAGEMENT

The Professional Limited Liability Company is to be managed by its sole Member and the name and address of such Member who is to serve is:

JAIME NAVARRO 1270 Wildwood Lakes BLVD Naples, FL 34104

#### ARTICLE V

# ADMISSION OF NEW MEMBERS

The right, if given, of the remaining members to admit additional members and terms and conditions of the admissions shall be:

The manager may admit new members in its sole unfettered discretion subject only to the condition that such additional member must agree in writing to the bound as a member by Operating Agreement of the Company.

# ARTICLE VI

# MEMBERS RIGHTS TO CONTINUE BUSINESS

The right, if given, of the remaining members of the professional limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a members in the professional limited liability company shall be:

FITNESS 4LITE CONSULTING LI C 1270 Wildwood Lukes BLVD Naples, El 34494 (786)474-1827 The death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a members in the professional limited liability company shall not terminate the company, and the business of the company shall be automatically continued, so long as there is at least one remaining member.

# ARTICLE VII

## NATURE OF BUSINESS

The purpose for which the professional limited liability company is organized shall be to engage in personal fitness training within the State of Florida, and to do those things that are necessary or proper in connection with that practice.

AUTHORIZED REPRESENTATIVE OF MEMBER

FITNESS 4LIFE CONSULTING U.C.

JAIME NAVARRO

FTTNESS (LIBE CONSULTING LLC 1270 Wildwood Lakes BLVD Naples, F134164 (786)474-1827 STATE OF FLORIDA ()

COLLIER COUNTY (

The foregoing instrument was acknowledged before me this 12th day of November 2020, by JAIME NAVARRO, as Authorized Representative of FITNESS 4LIFE CONSULTING LLC, who is personally known to me.

Witness my hand and official seal in the county and state last aforesaid on day and year first written above.

ANA GISSELA PATINO
State of Fierda-Notary Public
Commission & GC (18134
My Commission Expires
June 30, 2021

Notary Public State of Florida My Commission No. GG | 18134 My Commission Expires: June 30, 2021

ACCEPTANCE OF REGISTERED AGENT

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Pursuant to the provisions of Section 608.415 or 608.507, Florida States, the undersigned Professional Limited Liability Company submits the following statement to designate a Registered Office and Registered Agent in State of Florida:

The name of the Professional Limited Liability Company is:

FITNESS 4LIFE CONSULTING LLC

The name and Florida street address of the Registered Agent are:

JAIME NAVARRO 1270 Wildwood Lakes BLVD Naples, FL 34104

Having been named as Registered Agent and to accept of process for the above stated professional 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.

JAIME NAVARRO