

L21 000 486669

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

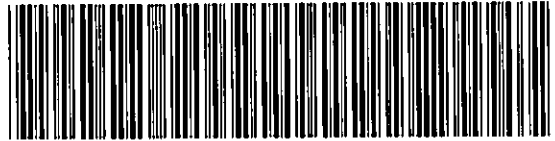
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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11/10/21--01003--003 \*\*465.00

FILED  
RECEIVED 2021 NOV 15 AM 8:11  
SECRETARY OF STATE  
2021 NOV -9 PM 4:29  
HALL COUNTY, FL



12905 SW 42 STREET Suite: 210  
MIAMI, FL 33175  
Phone: 305-444-4994  
Email: filing@ecfsfiling.com

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBERS(S):

1. ZERAI Fitness Lottery LLC  
(CORPORATE NAME) (DOCUMENT #)

2. \_\_\_\_\_  
(CORPORATE NAME) (DOCUMENT #)

3. \_\_\_\_\_  
(CORPORATE NAME) (DOCUMENT #)

☐ Walk-In

X Pick up time: \_\_\_\_\_



☒ Certified Copy

☐ Certificate Of Status

New Filings	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	Non-Profit
<input checked="" type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Other:

Amendments	
<input type="checkbox"/>	Amendments
<input type="checkbox"/>	Resignation
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Other:

Other Filings	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Apostille:
<input type="checkbox"/>	Other:

Examiners Initials	
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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 10, 2021

EXPRESS

SUBJECT: ZERA FITNESS LOTTERY LLC  
Ref. Number: W21000145718

We have received your document for ZERA FITNESS LOTTERY LLC and your check(s) totaling \$465.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 24.119, Florida Statutes, written approval and clearance of the term LOTTERY must be obtained from the Department of the Lottery. Their address is:

Department of the Lottery  
250 Marriott Dr.  
Tallahassee, FL 32301

Please return 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.

Neysa Culligan  
Regulatory Specialist III

Letter Number: 721A00027372

RECEIVED  
TALLAHASSEE, FLORIDA

2021 NOV 15 PM 3:58

FILED

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

2021 NOV 15 AM 8:11

## ARTICLE I - Name:

The name of the Limited Liability Company is:

ZERA1 FITNESS LLC

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

SECRETARY OF STATE  
TALLAHASSEE, FL

## ARTICLE II - Address:

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

Principal Office Address:Mailing Address:7620 ABBOTT AVE7620 ABBOTT AVEAPT 2APT 2MIAMI BEACH, FL 33141MIAMI BEACH, FL 33141

## ARTICLE III - Registered Agent, Registered Office, &amp; 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:

RAMSES RODRIGUEZ FERNANDEZ

Name

7620 ABBOTT AVE APT 2Florida street address (P.O. Box NOT acceptable)MIAMI BEACHFL33141

City

State

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 (REQUIRED)

(CONTINUED)

