Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000408022 3)))



H240004090223ABCW

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

The same of the sa

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : FASTKIT CORP Account Number : I20108830009 Phone : (305)599-0839 Fax Number : (305)592-9591

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

## FLORIDA LIMITED LIABILITY CO.

## FIT AFTER FIFTY CARDIO KICKBOXING LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu Corporate Filing Menu

Help

1/1

## ARTICLESOF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:			
The name of the Limited	Liability Company is:		
E	IT AFTER FIFTY CARDIO F	KICKBOXING LLC	
(M	lust end with the words "Limite	ed Liability Company, "L.L.C.,"	or "LLC")
ARTICLE II - Address	<b>:</b>		
The mailing address and	street address of the principal c	office of the Limited Lizbility Cor	npany is:
Principal Office Addres	<u>:22</u>	Mailing Address:	
1940 SW 12TH ST		1940 SW 12THS T	
MIAMI FL 33135		MIAMI FL 33135	
1940 SW 12 <sup>TH</sup> ST	CARLOS ENRIQUE GARC Name	<u>IA</u>	
Florida street address (I	P.O. Box NOT acceptable)		
МІАМІ	FL 33135		
	City	Zip	
the place designated in	this certificate. I hereby accept we to comply with the provisions	service of process for the above s t the appointment as registered up s of all statutes relating to the pro digations of my position as registe t	рег ана сонунет регуонтонсе

## ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

Name and Address:

CARLOS ENRIQUE GARCIA 1940 SW 12<sup>TH</sup> ST MIMAI FL 33135

(Use attachment if necessary)

2024 DEC 11 PH 5: 16

ARTICLE V: Effective date, if other than the date of filing 12/11/2024 (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

ARTICLE VI: Other provisions, if any.

Signature of a member or an authorized representative of a member. (In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true, 1

am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

PRINTED NAME AND SIGNATURE:

OBJUDIT ORCOVIA

Page 2 of 2

2024 DEC 11 PM 5: 19