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(Re	equestor's Name)			
(Ac	dress)	,		
(Ad	dress)			
(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Do	cument Number)			
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Certified Copies	_ Certificates	of Status		
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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	- ·	
SUBJECT: Percy Management LLC		
(Name of Lim	ited Liability Company)	
	bility Company for Authorization to Transact Business in abmitted to register the above referenced foreign limited	
Please return all correspondence concerning this m	natter to the following:	
Scott W. Jackson		
(Nai	me of Person)	
Percy Management LLC		
(Fir	m/Company)	
19552 Club House Road		
1	(Address)	
Montgomery Village MD 20886		
(City/Sta	ate and Zip Code)	
	.,	
For further information concerning this matter, plea	ase call:	
Coatt M. Includes	204 026 2404	
Scott W. Jackson (Name of Person)	at (301) 926-3401 extension 206 (Area Code & Daytime Telephone Number)	
(Name of Ferson)	(Area Code & Daytime Telephone Number)	
STREET ADDRESS: MAILING ADDRESS:		
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
409 E. Gaines Street	P.O. Box 6327	
Tallahassee, Florida 32399	Tallahassee, Florida 32314	
Enclosed is a check for the following amount:	e e - e e e e e e e e e e e e e e e e e e e	
□ \$125.00 Filing Fee	☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Certificate Status Certified Copy of Status & Certified Copy	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1.	Percy Management LLC
	(Name of Foreign Limited Liability Company)
2.	State of Maryland (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)
4.	company is organized) 01/13/2003 5 Perpetual (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6.	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7.	Percy Management LLC c/o Scott W. Jackson
8.	19552 Club House Road, Montgomery Village, MD 20886 (Street Address of Principal Office) If limited liability company is a manager-managed company, check here
	If limited liability company is a manager-managed company, check here The name and usual business addresses of the managing members or managers are as follows: Scott W. Jackson
	19552 Club House Road
	Montgomery Village, MD 20886
th	0. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in e jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a anslation of the certificate under oath of the translator must be submitted.)
1 3	1. Nature of business or purposes to be conducted or promoted in Florida: Health Club/Gym
	Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Typed or printed name of signee

Scott W. Jackson, President

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:	
Percy Management LLC	
2. The name and the Florida street address of the registered agent and office are:	
Scott W. Jackson (Name)	
1075 Duval Street, C-11 Florida Street Address (P.O. Box NOT ACCEPTABLE)	
Key West, FL 33040 FL	· · · · ·

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 608, Florida Statutes.

(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

STATE OF MARYLAND

Department of Assessments and Taxation

I, PAUL B. ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO LIMITED LIABILITY COMPANIES OR THE RIGHTS OF LIMITED LIABILITY COMPANIES TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT PERCY MANAGEMENT, LLC IS A LIMITED LIABILITY COMPANY EXISTING UNDER AND BY VIRTUE OF THE LAWS OF THE STATE OF MARYLAND, AND THAT THE LIMITED LIABILITY COMPANY IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING TO TRANSACT BUSINESS.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS JULY 23, 2004.

Paul B. Anderson Charter Division

Paul B. Under



301 West Preston Street, Baltimore, Maryland 21201
Telephone Balto. Metro (410) 767-1340 / Outside Balto. Metro (888) 246-5941
MRS (Maryland Relay Service) (800) 735-2258 TT/Voice
Fax (410) 333-7097