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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Suit-up4healthandfitness L.L.C.			
(Name of Limit	ted Liability Company)		
	bility Company for Authorization to Transact Business in bmitted to register the above referenced foreign limited		
Please return all correspondence concerning this ma	atter to the following:		
Rose Anna Buckley			
(Name of Person)			
Suit-up4healthandfitness L.L.C.			
(Firm	n/Company)		
3682 N. Wickham Road Suit	te B1 / Box 501		
	Address)		
Melbourne, FL 32935			
(City/Star	te and Zip Code)		
For further information concerning this matter, please	se call:		
Rose Anna Buckley	at (321) 514-4251		
(Name of Person)	(Area Code & Daytime Telephone Number)		
MAILING ADDRESS:	STREET ADDRESS:		
Division of Corporations	Division of Corporations		
	Clifton Building		
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301		
Enclosed is a check for the following amount: \$\Bigsiz\$ \$\siz\$ \$125.00 \text{ Filing Fee} \text{ \$\siz\$ \$\siz\$ \$130.00 \text{ Filing Fee & Certificate of S}\$	☐\$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:

Suit-up4healthandfitness L.L.C. (Name of Foreign	n Limited Liability Company)
Delaware	3. 26-0513887
Jurisdiction under the law of which foreign limited company is organized)	
June 11, 2007	_{5.} Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
	place to date. Website under construction.
	siness in Florida, if prior to registration.) 08.502 F.S. to determine penalty liability)
3682 N. Wickham Road Suite B1, Box	: 501, Melbourne, FL 32935 字形 上
	Alli ASS
(Stree	et Address of Principal Office)
If limited liability company is a manager-	_ F3 5
The name and usual business addresses of	f the managing members or managers are as follows:
Rosemany Matos - 3682 N. Wickham Ros	ad Suite B1, Box 501, Melbourne, FL 32935
Treservary Maries 2002 N. Wiokham Not	ad data 51, 50x do 1, Nicibariia, 12 d2dd
Rose Anna Buckley- 3682 N. Wickham	Road Suite B1, Box 501, Melbourne, FL 32935
	ore than 90 days old, duly authenticated by the official having custody of record A photocopy is not acceptable. If the certificate is in a foreign language, a nust be submitted.)
Nature of business or purposes to be con-	ducted or promoted in Florida: Retail-Website
Rose Anna Signature of a member	or an authorized representative of a member.
(In accordance with section 60	08.408(3), F.S., the execution of this document constitutes alties of perjury that the facts stated herein are true.)
Rose Anna Buckley	

Typed or printed name of signee

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 Liabil	ity Company is:	
Suit-up4healthandfitness L	.L.C.	
2. The name and the Florida street	address of the registered agent and office are:	
Rose Anna Bud	kley	SEC TAL
	(Name)	
3682 N. Wickh	nam Road Suite B1 / Box 501	26 ASSE
Florida	Street Address (P.O. Box NOT ACCEPTABLE)	
Melbourne,	FL 32935	DRATE SS
- -	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 608, Florida Statutes.

ROWING BULLY
(Signature)

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

Delaware

PAGE :

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SUIT-UP4HEALTHANDFITNESS L.L.C." IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIFTH DAY OF JULY, A.D. 2007.



Warriet Smith Hendson
Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5818247

DATE: 07-05-07

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