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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : TRIAD PROFESSIONAL SERVICES, LLC

Account Number : I20020000094

Phone

: (770)777-2091

Fax Number

: (770)220-1943

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

Foreign Limited Liability Company JRG FITNESS OPERATIONS, LLC

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

B. BOSTICK Help

JUL - 6 2012

EXAMINER

7/5/2012

COVER LETTER

	JRG Fitness Operations, L	LC			
SUBJECT	`:	Name of Limited Liability Company	· · · · ·		
The enclos Existence,	ed "Application by Foreign Limited L and check are submitted to register th	iability Company for Authorization to Transact Business e above referenced foreign limited liability company to tra	in Florida," Certificate of ansact business in Florida		
Please retu	im all correspondence concerning this	matter to the following:			
	Mary Paris				
		Name of Person			
	Triad Professional Services				
	Finn/Company				
	1720 Windward Concourse, Suite 390				
	Address				
	Alpharetta, GA 30005				
	City/State and Zip Code				
	terry@northavegroup.co	om			
	E-mail addres	s: (to be used for future annual report notification)			
For further	r information concerning this matter, p	please call;	For L		
Mary Paris		770 777-2091	TE JUL		
_	Name of Person	Area Code & Daytime Telephone Number	SSS N		
Î R P	AAILING ADDRESS: Division of Corporations Logistration Section LO. Box 6327 fallahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	-5 AH 2: 14 SSEE, FLORIDA		
	d is a check for the following an \$125.00 Filing Fee \$130.00 Filing	g Fee & \$155.00 Filing Fee & \$160.00 Filing F			

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

IN COMPLIANCE WITH SECTION 608503. FLORIDA STATUTES THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN

A	Fitness Operations, LLC	clud	"Limited Liability Company," "L.L.C.," or "LLC.")		
consent o	unavailable, enter alternate name adopted for the purport the managers or managing members adopting the al	pose	of transacting business in Florida and attach a copy of transacting business in Flori	of the writte Liability	
2. Geo	•	3.	35-2441184		
(Jurisd	liction under the law of which foreign limited liability ny is organized)	, •••	(FEI number, if applicable)		
4. 3/1	9/2012	5.	Perpetual		
	(Date of Organization)	٠.	(Duration: Year limited liability company will cease exist or "perpetual")	e to	
6. Upo	n qualification		,		
	(Date first transacted business in (See sections 608.501 & 608.502 F Bill Kennedy Way, SE	Flor S, t	da, il prior to registration.) o determino penalty liability)		
Atla	nta GA 30316				
	(Street Addres	SS O	Principal Office)	•	
8. If lir	8. If limited liability company is a manager-managed company, check here				
9. The	. The name and usual business addresses of the managing members or managers are as follows: 🖧 🔻				
Тет	y Comer, Manager		်ကြည်း ကြည်း		
420	Bill Kennedy Way, SE, Atlanta GA 3031	6	E OR	,	
			DA C		
the jurisd translatio	thed is an original certificate of existence, no more than 9 iction under the law of which it is organized. (A photoon of the certificate under eath of the translator must be su	opy ibmi	is not acceptable. If the certificate is in a foreign language tool.)		
	ture of business or purposes to be conducted	or i	promoted in Florida:		
10 €	ingage in any lawful act or activity	7 <u>. </u>		·	
		E			
	(In accordance with section 608,408(3), F.S., the expendities of perjury that the facts stated herein are	ceeui : true	norized representative of a member. ion of this document constitutes an affirmation under the , I am aware that any false information submitted in a third degree felony as provided for in s.817.155, F.S.		
	Typed or print	ed:	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.

The name of the Limited Liability Co JRG Fitness Operations, LLC	ompany is:	
If unavailable, the alternate to be used in	the state of Florida is:	
2. The name and the Florida street address	ess of the registered agent and office are	D:
NRAI Services, inc.		12 TALL
 	(Name)	
515 East Park Avenue	515 East Park Avenue	
Florida Street	Florida Street Address (P.O. Box NOT ACCEPTABLE)	
Tallahassee	32301	M 2: I
	City/State/Zip	0 F

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 dutles, and I am famillar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes. NRAI Services, Inc.

By: Mary Parks
(Signature)

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

Control No. 12024796

STATE OF GEORGIA

Secretary of State

Corporations Division
313 West Tower
2 Martin Luther King, Jr. Drive
Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

JRG FITNESS OPERATIONS, LLC

Domestic Limited Liability Company

was formed or was authorized to transact business on 03/19/2012 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official scal of the City of Atlanta and the State of Georgia on 3rd day of July, 2012

B: P.h-

Brian P. Kemp Secretary of State

Certification Number: 9189055-1 Reference; Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp