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| PICK-UP | WAIT | MAIL | |
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| Certified Copies | _ Certificates | of Status | |
| Special Instructions to Filing Officer: | | | |
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C. LEWIS
NOVA 8 2012
EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 14, 2012

ISAAC BENMERGUI / LAW OFFICES OF ISAAC BENMERGUI 1150 KANE CONCOURSE 2ND FLOOR BAY HARBOR ISLANDS, FL 33154

SUBJECT: JET FITNESS LLC Ref. Number: W12000057511

We have received your document for JET FITNESS LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any further questions concerning your document, please call (850) 245-6051.

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 912A00027508

COVER LETTER

| TO: | Registration Section Division of Corporations |
|--------------------|--|
| SUBJE | CT: |
| The end Existen | closed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of ce, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida |
| Please 1 | return all correspondence concerning this matter to the following: |
| | |
| | 15AAZ DEMEGIN |
| | Name of Person |
| | Law Office, LEAR Bennerrain |
| | F(rrh/Company |
| | 1150 Kane concause 2 nd Floor |
| | Bay Harbor Islands, H. 33154 |
| | City/State and Zip Code |
| For furt | her information concerning this matter, please call: |
| 1 Of Ture | / . |
| | Name of Person Area Code & Daytime Telephone Number |
| | MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301 |
| | ted is a check for the following amount: \$125.00 Filing Fee \$\frac{1}{2}\$130.00 Filing Fee & \$\frac{1}{2}\$155.00 Filing Fee & \$\frac{1}{2}\$160.00 Filing Fee, Certificate 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. (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") |
| |
| (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability" |
| Company," "L.L.C," "LLC.") |
| 2. De aware 3. 45-5/44873 (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) |
| company is organized). |
| Per so hul |
| 4. 4/24/2 (Date of Organization) 5. (Duration: Year limited liability company will cease to exist or "perpetual") |
| 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. 2711 Centerville Road Suite 400 N |
| |
| Wilmington, Delaware 19808 (Street Address of Principal Office) |
| |
| 8. If limited liability company is a manager-managed company, check here |
| 9. The name and usual business addresses of the managing members or managers are as follows: |
| |
| Eddic Abittan Go 1150 Kane Concourse, 2nd Floor, By Harder ished Dan Neghira Go 1150 Kane Concourse, 2nd floor, Bay Haller island, 4. 33/54 |
| Dan Neghica 46 1150 Kane Concerne 2nd floor Bay Kalk bor 15land 41. 33/54 |
| |
| |
| 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in |
| the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translation must be submitted.) |
| |
| 11. Nature of business or purposes to be conducted or promoted in Florida: |
| Any and all lawfull business of |
| |
| 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. I 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.) |
| Typed or printed name of hignee |
| Typed or printed name of slignee |

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: | |
|--|--------------|
| Jet Fitness, LLC | _ |
| If unavailable, the alternate to be used in the state of Florida is: | |
| 2. The name and the Florida street address of the registered agent and office are: | - Share |
| Law office y BAAC Bernerain, P.A. | WISIGN OF CO |
| 1150 Kane Gncouse, 2 ht floor, Florida Street Address (P.O. Box NOT ACCEPTABLE) | PH 2:0 |
| Bay Harbor islands FL 33154 City/State/Zip | , i. |
| | |

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.

\$ 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 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "JET FITNESS LLC" 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 TWENTY-SIXTH DAY OF NOVEMBER, A.D. 2012.

5144232 8300

121260726

Jeffrey W. Bullock, Secretary of State
AUTHENTYCATION: 0010301

DATE: 11-26-12

You may verify this certificate online at corp.delaware.gov/authver.shtml