M1800000 2587

Office Use Only



900309022759

02/16/16--01018--01S **130.88

2010 HAR 15 PM 3: 21 SECRETARY OF STATE TALL AHASSEE FLORIDA

MARRIS J. HARRIS

COVER LETTER

;

	Registration Section Division of Corporation	s					
SUBJEC		ERNATIONAL, LLC					
	•	Name of I	imited Liability C	Company			
The enclo Existence	sed "Application by For , and check are submitted	eign Limited Liability Comp I to register the above refere	oany for Authoriza enced foreign limit	tion to Tra ed liability	insact Business in Florida," Cer company to transact business i	tificate of in Florida.	
Please ret	urn all correspondence c	oncerning this matter to the	following:				
	ADAM F. S	MALL, CPA					
		N:	ame of Person				
	BARNES SMALL & MCGEE CPAS, PLLC						
	Firm/Company						
	2500 N. MILITARY TRAIL, STE 220						
Address							
	BOCA RATON, FL 33431						
	· · ·	City/S	tate and Zip Code				
	ADAM@BSM-C	PA.COM					
		E-mail address: (to be used	for future annual	report not	ification)		
For furthe	r information concerning	g this matter, please call:					
	ADAM F. SMALL		561 at (245-21:	51		
_	Name o	f Contact Person	Area Code	Day	time Telephone Number		
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassec, FL 32301					
	is a check for the follow □ \$125.00 Filing Fee	ing amount: S130.00 Filing Fee & Certificate of Status	□ \$155.00 Filin Certified Copy	g Fee &	☐ \$160.00 Filing Fee. Certifi of Status & Certified Copy	cate	



March 1, 2018

ADAM F SMALL BARNES SMALL & MCGEE CPAS, PLLC 2500 N MILITARY TRAIL, STE 220 BOCA RATON, FL 33431

SUBJECT: FIT CAMPUS INTERNATIONAL, LLC

Ref. Number: W18000016432

We have received your document for FIT CAMPUS INTERNATIONAL, LLC and your check(s) totaling \$130.00. However, the document has not been filed and is being retained in this office for the following:

You failed to make the correction(s) requested in our previous letter.

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.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Jenna D Harris Regulatory Specialist II

Letter Number: 718A00004215





February 19, 2018

ADAM F SMALL BARNES SMALL & MCGEE CPAS, PLLC 2500 N MILITARY TRAIL, STE 220 BOCA RATON, FL 33431

SUBJECT: FIT CAMPUS INTERNATIONAL, LLC

Ref. Number: W18000016432

We have received your document for FIT CAMPUS INTERNATIONAL, LLC and your check(s) totaling \$130.00. However, the document has not been filed and is being retained in this office for the following:

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.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Jenna D Harris Regulatory Specialist II

FIG 28 1.14

Letter Number: 318A00003465

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

and the state of the state of the state of	mark accepted for the purpose of transacting outlier.		ed Liability Company," "L.L.C," or "LLC
DELAWARE	high foreign lurated liability company is organized	3. 82-3686034	l number, if applicable)
(Jurisdiction under the law of w	nich toreign titmied tiability company is organized,) (re	i numoer, ii applicable)
01/30/18	(D. Z		
	(Date first transacted business in Florida, if (See sections 605,0904 & 605,0905, F.S. to		
9285 SW 125 AVENU		6. 9285 SW 125 AVENU	
(Street Address of I MIAMI, FL 33186	enncipal Office)	MIAMI, FL 33186	g Address)
			·
			· · · · · · · · · · · · · · · · · · ·
Name and street addres	ss of Florida registered agent: (P.O). Box NOT acceptable)	2018 544 1A44
-	ADAM F. SMALL C/O BSM	·	EAR AR
Name:			表 2
		E 220	<i>∪,</i>
Office Address:	2500 N. MILITARY TRAIL, ST	E 220	SS
Office Address:	BOCA RATON		₽\$ ₽\$
istered agent's accep ing been named as re gnated in this applica omply with the provisi	BOCA RATON (City) stance: rgistered agent and to accept servication, I hereby accept the appointment	, Florida 33431 (Z) ce of process for the above stated linent as registered agent and agree to troper and complete performance of	ip code) aited liability company at the act in this capacity. I further
gistered agent's accep ving been named as re ignated in this applica comply with the provisi	BOCA RATON (City) Stance: Singuistered agent and to accept service ation, I hereby accept the appointm ions of all statutes relative to the p s of my position as registered agen	, Florida 33431 (Z) ce of process for the above stated linent as registered agent and agree to troper and complete performance of	ip code) aited liability company at the act in this capacity. I further
gistered agent's accep ving been named as re ignated in this applica comply with the provisi I accept the obligation	BOCA RATON (City) Itance: The end to accept service the appointment of all statutes relative to the position of my position of registered agent (Registered)	Florida 33431 (zee of process for the above stated linent as registered agent and agree to roper and complete performance of at.	ip code) Some fine and learning design of the control of the contr
gistered agent's accep ving been named as re ignated in this applica comply with the provisi I accept the obligation	BOCA RATON (City) Itance: The end to accept service the appointment of all statutes relative to the position of my position of registered agent (Registered)	, Florida 33431 (Z. ce of process for the above stated lin ment as registered agent and agree to troper and complete performance of at.	ip code) Some fine and learning design of the control of the contr
gistered agent's acception been named as reignated in this applicationally with the provision accept the obligation. The name, title or capa	BOCA RATON (City) Intance: Registered agent and to accept service ation, I hereby accept the appointment ions of all statutes relative to the p s of my position as registered agent (Registered active and address of the person(s) we	Florida 33431 (Z. ce of process for the above stated line that as registered agent and agree to proper and complete performance of at. agent's signature) who has/have authority to manage is/a	ip code)
gistered agent's accepting been named as reignated in this applicationally with the provisal accept the obligation. The name, title or caps	BOCA RATON (City) Intance: Togistered agent and to accept service Ition, I hereby accept the appointment ions of all statutes relative to the point of the po	Florida 33431 (z. ce of process for the above stated limitent as registered agent and agree to roper and complete performance of at. agent's signature) who has/have authority to manage is/a Title or Capacity:	ip code)
pistered agent's accepting been named as reignated in this applicationally with the provise accept the obligation. The name, title or caps	BOCA RATON (City) Intance: Togistered agent and to accept service tion, I hereby accept the appointment ions of all statutes relative to the position of registered agent (Registered accity and address of the person(s) was and Address: EMMANUEL SOTO	Florida 33431 (z. ce of process for the above stated limitent as registered agent and agree to roper and complete performance of at. agent's signature) who has/have authority to manage is/a Title or Capacity:	ip code)
pistered agent's accepting been named as reignated in this applicationally with the provise accept the obligation. The name, title or caps	BOCA RATON (City) Intance: Togistered agent and to accept service Ition, I hereby accept the appointment ions of all statutes relative to the point of the po	Florida 33431 (z. ce of process for the above stated limitent as registered agent and agree to roper and complete performance of at. agent's signature) who has/have authority to manage is/a Title or Capacity:	ip code)
gistered agent's accepting been named as reignated in this applicationally with the provisal accept the obligation. The name, title or caps	BOCA RATON (City) Intance: Togistered agent and to accept service Ition, I hereby accept the appointment ions of all statutes relative to the point of the po	Florida 33431 (z. ce of process for the above stated limitent as registered agent and agree to roper and complete performance of at. agent's signature) who has/have authority to manage is/a Title or Capacity:	ip code)
gistered agent's accepting been named as reignated in this applicationally with the provision accept the obligation. The name, title or caps	BOCA RATON (City) Intance: Togistered agent and to accept service Ition, I hereby accept the appointment in the point of the point	Florida 33431 (z. ce of process for the above stated limitent as registered agent and agree to roper and complete performance of at. agent's signature) who has/have authority to manage is/a Title or Capacity:	ip code)

Typed or printed name of signee

Page 1



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

DELAWARE, DO HEREBY CERTIFY "FIT CAMPUS INTERNATIONAL, 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 EIGHTH DAY OF MARCH, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.



Authentication: 202285553

Date: 03-08-18

6647806 8300 SR# 20181800752



State of Belaware

SECRETARY OF STATE DIVISION OF CORPORATIONS P.O. BOX 898 DOVER, DELAWARE 19903

8157649 BARNES SMALL & MCGEE CPAS, PLLC 2500 N MILITARY TRAIL, STE 220 BOCA RATON, FL 33431 03-08-2018

Δ	TT	N٠	4	DA	M	F	SA	AAI	п

DESCRIPTION		AMOUNT
6647806 - FIT CAMPUS INTERNATIONAL, LLC Entity Status - Short Form		
	Certification Fee	\$50.00
	Expedite Fee, 24 Hour	\$40.00
	TOTAL CHARGES	\$90.00
	TOTAL PAYMENTS	\$90.00
	BALANCE	\$0.00