TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 F!LED 00 NOV-6 AM 9:09

SECRETARY OF STATE TALLAHASSEE, FLORIDA

SUBJECT: Perf	fect Fit Personal Train (PROPOSED CORPORA)	ing, Inc. TE NAME- <u>MUST INCL</u>	UDE SUFFIX)	_ ·
		ė	40000345: -11/06/00- *****87.50	3 074 -01080001) *****87.
Enclosed is an origin	al and one(1) copy of the article	es of incorporation and a	check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status DPY REQUIRED	
FROM	: Elsie L. Blevins Name (Pr	rinted or typed)		-
	4523 Parkwood Square	Address		
	Niceville, FL 32578 City,	State & Zip		
	(850) 807-0100	,		

NOTE: Please provide the original and one copy of the articles.

Daytime Telephone number

ARTICLES OF INCORPORATION	·
In compliance with Chapter 607 and/or Chapter 621	, F.S. (Profit)
A 70.000 000 000 000	F.S. (Profit) t Personal Training, Inc. SECRETARY OF
ARTICLE I NAME The name of the corporation shall be: Perfect Fi	00 vo 4 D
reriect Fi	t Personal Training, Inc. 6
•	TAIL CREMON 47 9:09
A many air	LAHASSE OF STATE
ARTICLE II PRINCIPAL OFFICE	SECRETARY OF STATE 523 Parkwood Square
The principal place of business/mailing address is: 4	rarawood bydale
N	iceville, FL 32578
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is	s: To conduct personal training and fitness
•	evaluations.
	•
ARTICLE IV SHARES	
The number of shares of stock is: 200	to a control of the c
and of or black of block is.	
ARTICLE V INITIAL OFFICERS DIRECTO	ORS (optional)
The name(s) and address(es): Elsie L. Blevins	
4523 Parkwood Squ Niceville, FL 32	are
MICEVILLE, FL 32	5/8
ARTICLE VI REGISTERED AGENT	
The name and Florida street address of the registered	agent is: Elsie I. Blaving
,	4523 Parkwood Square
	Niceville, FL 32578
ARTICLE VII INCORPORATOR	
	L. Blevins
4523 P	Parkwood Square
Nicevi	lle, FL 32578

tuving been numed as registered agent to accept comics of masses	
vertificate, I am familiar with and accept the appointment as regist	tered agent and agree to act in this capacity
Lan I Roma	
ignature/Registered Agent	11/2/00
Tommer Augustetet Agent	Date
- 1 K	

· Signature/Incorporator