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SECRETARY OF STATE
TALLAHASSEE FLORIDAFlorida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 205-0381

From:

Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346

FLORIDA PROFIT CORPORATION OR P.A.

ZONE ONE HEALTH & FITNESS, INC.

Certificate of Status	0
Certified Copy	1
Page Count	034
Estimated Charge	\$78.75

ARTICLES OF INCORPORATION
OF

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02 SEP 17 PM 4:38

ZONE ONE HEALTH & FITNESS, INC.

SECRETARY OF STATE
TALLAHASSEE FLORIDA

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

ZONE ONE HEALTH & FITNESS, INC.

The principal place of business of this corporation shall be:

238 MINORCA AVENUE CORAL GABLES, FL 33134

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time is:

100 SHARES @ 1.00 PAR VALUE

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

JENNIE SICILE
9260 SW 71 STREET
MIAMI, FL 33173

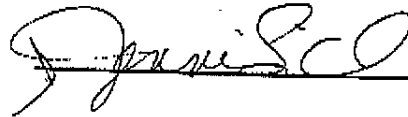
ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are):

JENNIE SICILE
9260 SW 71 STREET
MIAMI, FL 33173

IN WITNESS WHEREOF, the undersigned incorporator(s)
has (have) executed these Articles of Incorporation
this, 16th day of SEPTEMBER ~~2001~~ 2002

Signature(s) of Incorporator(s)



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CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

02 SEP 17 PM 4:38

Pursuant to the provisions of Section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation:

ZONE ONE HEALTH & FITNESS, INC.

2. The name and address of the registered agent and office is:

JENNIE SICILE

238 MINORCA AVENUE

(P.O. BOX NOT ACCEPTABLE)

CORAL GABLES, FL 33134

(CITY/STATE/ZIP)

SIGNATURE Jennie Sicile

TITLE _____

DATE SEPTEMBER 16, 2002

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE Jennie Sicile

DATE SEPTEMBER 16, 2002