P04000/24002

•			
	(Rec	juestor's Name)	
	(Add	iress)	-
	(Add	lress)	
	(City	/State/Zip/Phon	e #)
PICK-UI	P	☐ WAIT	MAIL
	(Bus	iness Entity Na	me)
	(Doc	ument Number)
Certified Copies		Certificate	s of Status
Special Instructions	s to F	iling Officer:	
			ļ
		· · · · · · · · · · · · · · · · · · ·	

Office Use Only



200040527082

08/27/04--01012--005 **78.75

FILED

OF THE 27 PH 3: 25

SEVEN AND SEPTIMENTAL AND ADMINISTRATES

ALL AND SEPTIMENTAL AND ADMI

1 Den 8-27-04

TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT:	EVOLUTION	HEALTH	ŧ	FITNESS,	Inc.
	(PROPOS	SED CORPORAT	E N	AME - MUST INCL	UDE SUFFIX)

Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	a check for:
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED

FROM:	EVOLUTION HEALTH & FITNESS, INC.
_	Name (Printed or typed) 129 No. Pineapple Ave.
	SARASOTA, FL. 34236
	City, State & Zip (941) 953 – 6000 Daytime Telephone number

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

ARTICLES OF INCORPORATION	ru rn
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	FILED
The name of the corporation shall be:	04 AUG 27 PM 3: 25
EVOLUTION HEALTH & FITNESS, INC.	SECRETALY OF STATE TALL SHASSEE, FLORIDA
CAOCOLON LIEUCIA A L'ALESSA	TALL WING FIRE A LEONIUM
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 129 No. Pineapple Ave. SARASOTA, FL. 34236	
ARTICLE III PURPOSE The purpose for which the corporation is organized is: TO OPERATE A HEALTH & FITNESS CENTER. ANY OR ALL OTHER LEGAL PURPOSES.	AND TO DO
ARTICLE IV SHARES	
The number of shares of stock is:	
100 SHARES	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):	
FRUECTO SANTANA, PRESIDENT, 129 No. PINEAL	PPLE AVE., SARASOTA, FL.
Emily Rossi Romer, Exec. V.P., 129 No. PiNEA Richard F. Jennette V. P. 129 No. Pinnea	PPLE AVE., SARASOTA, FL.
ARTICLE VI REGISTERED AGENT	
The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the register	red agent is:
Emily Rossi Romer. 129 No. Pineapple Ave. Sarasota, FL. 34236	
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
Emily Rossi Romer. 129 No. PiNEAPPLE AVE.	
SARASOTA, FL. 34236	
**************************************	**************************************
ϵ_{0} ϵ_{0} ϵ_{0}	-1-1
Signature/Registered Agent	7 24 04 Date
6. 1. 0 1.	
1, 11 1 1 A	
Signature/Incorporator	8/24/04