

PO6000147 269

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. WHITE NOV. 28 2006

COVER LETTER

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

SUBJECT: ROBIN ANDERSON, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: ROBIN ANDERSON
Name (Printed or typed)

3425 COLLINS AVENUE
Address

MIAMI BEACH, FL 33140
City, State & Zip

305-905-3029
Daytime Telephone number

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

ROBIN ANDERSON, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

3425 COLLINS AVENUE #935
MIAMI BEACH, FL. 33140

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PERSONAL FITNESS TRAINING

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

ROBIN ANDERSON, PRESIDENT
3425 COLLINS AVENUE #935
MIAMI BEACH, FL. 33140

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

ROBIN ANDERSON, Registered Agent
3425 COLLINS AVENUE #935
MIAMI BEACH, FL. 33140

ARTICLE VII INCORPORATOR

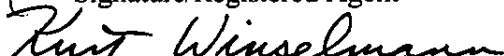
The name and address of the Incorporator is:

KURT WINSELMANN, CPA
4236 N. OCEAN DRIVE
HOLLYWOOD, FL. 33019

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent



Signature/Incorporator

FILED

06 NOV 27 PM 12:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11/20/06

Date

11/16/06

Date