# P89010007060

| (Requestor's Name)                      |  |  |  |  |
|---|--|--|--|--|
|   |  |  |  |  |
| (Address)                               |  |  |  |  |
| (Fiduless)                              |  |  |  |  |
|   |  |  |  |  |
| (Address)                               |  |  |  |  |
|   |  |  |  |  |
| (City/State/Zip/Phone #)                |  |  |  |  |
| ,                                       |  |  |  |  |
| PICK-UP WAIT MAIL                       |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
| (Business Entity Name)                  |  |  |  |  |
|   |  |  |  |  |
| (Document Number)                       |  |  |  |  |
| (Boodinent (Minsol)                     |  |  |  |  |
|   |  |  |  |  |
| Certified Copies Certificates of Status |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
| Special Instructions to Filing Officer: |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
| ·                                       |  |  |  |  |
|   |  |  |  |  |

Office Use Only



700159685177

08/21/09--01025--016 \*\*87.50

SECRETARY OF STATE

4

# **COVER LETTER**

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

| SUBJECT:  | 441 FITNESS, INC.  |                                    |   |  |
|---|--|------------------------------------|---|--|
| (PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u> ) |  |                                    |   |  |
| Enclosed are an orig                                    | inal and one (1) copy of the art                                   | icles of incorporation and         | a check for:  |  |
| □ \$70.00<br>Filing Fee                                 | ☐ \$78.75 Filing Fee & Certificate of Status                       | S78.75 Filing Fee & Certified Copy | \$87.50 Filing Fee, Certified Copy & Certificate o Status |  |
|   |  | ADDITIONAL COPY REQUIRED           |   |  |
| FROM:   | W. Rodgers Moore, P.A.  Name (Printed or typed)                    |                                    |   |  |
|   | 1900 Glades, Rd., Sulte 401  |                                    |   |  |
|   | Address  |                                    |   |  |
|   | Boca Raton, FL 33431   |                                    |   |  |
|   | City,  | State & Zip                        |   |  |
|   | 561-394-7944   |                                    |   |  |
|   | Daytime T  | elephone number                    |   |  |
| <del></del>   | wrmoorelaw@gmail.com   |                                    |   |  |
|   | E-mail address: (to be used for future annual report notification) |                                    |   |  |

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:

441 FITNESS, INC.

# ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 1289 Clint Moore Rd. Boca Raton, FL 33487



The purpose for which the corporation is organized is:

Operation of Gym/fitness facility and all other purposes permitted by Florida Law.

# ARTICLE IV SHARES

The number of shares of stock is:

# ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

### ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box **NOT** acceptable) of the registered agent is: W. Rodgers Moore, P.A.

1900 Glades Rd., Suite 401 Boca Raton, FL 33431

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

W. Rodgers Moore, P.A. 1900 Glades Rd., Suite 401

Boca Raton, FL 33431

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

Pre 9

Signature/Incorporator

W: Qolley Woore

8 | 20 | 09

Bate

Date

Date