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(Requestor's Name)				
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☐ PICK-UP ☐ WAIT ☐ MAIL				
(Business Entity Name)				
(Document Number)				
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3-11-10

COVER LETTER

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

SUBJECT: GoFitCo	each, Inc.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the arti	cles 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: Ro	chelle Griffin		
	Name	(Printed or typed)	
977	0 NE State Road 24		
	I	Address	·····
Arcl	ner, FL 32618	State & Zip	
	0.0,	Saw Co Esp	
352	-486-4517		
	Daytime T	elephone number	
roch	elle@gofitcoach.com		
- 1, .,,,	E-mail address: (to be use	d for future annual report i	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:

GoFitCoach, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 9770 NE State Road 24
Archer, FL 32618

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Lawful fitness business purposes

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):

Rochelle Griffin

Keith Griffin

9770 NE State Road 9770 NE State Road 24, Archer, FL 32618 24, Archer, FL 32618

President

Vice-President

ARTICLE VI REGISTERED AGENT

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

Rochelle Griffin

9770 NE State Road 24

Archer, FL 32618

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Rochelle Griffin

9770 NE State Road 24

Archer, FL 32618

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

M. M.

Signature/Incorporator

Date

Date