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## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : CSH SERVICES, LLC
Account Number : 120070000160
Phone : (800)494-3124
Fax Number : (561)455-9885

\*\*Enter the email address for this business entity to be used for future & annual report mailings. Enter only one email address please.\*\* annual report mailings. Enter only one email address please.\*\*

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## FLORIDA PROFIT/NON PROFIT CORPORATION SCHILLEN PRO EITNESS INC

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Electronic Filing Menu

Corporate Filing Menu

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#### **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:

SCHILLEN PRO FITNESS INC.

# ARTICLE II PRINCIPAL OFFICE

The principal place of business/malling address is:

9765 SW 155TH COURT MIAMI, FLORIDA 33196

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is to engage in any activity or business permitted under the laws of the State of Florida.

### ARTICLE IV SHARES

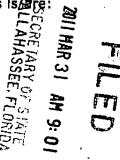
The number of shares of stock is:

1,500 COMMON SHARES PAR VALUE \$0.01

#### ARTICLE V INITIAL OFFICERS / DIRECTORS (optional)

The name(s), address(es), and title(s) of the directors and officers is &

PRESIDENT
SILVIO SCHILLEN
9765 SW 155TH COURT
MIAMI, FLORIDA 33196



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#### ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

SILVIO SCHILLEN 9765 SW 155TH COURT MIAMI, FLORIDA 33196

#### ARTICLE VII INCORPORATOR

The name and street address of the incorporator is:

SILVIO SCHILLEN 9765 SW 155TH COURT MIAMI, FLORIDA 33196 ݦ

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.

SCHILLEN / Registered Agent

SCHILLEN /Incorporator

03/31/20//
Date

03/31/20//
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