



**COVER LETTER**

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

**SUBJECT: Z-Extreme Fitness & Services, 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: Zohra Vayani

Name (Printed or typed)

212 Lake Pointe Dr apt 102

Address

Oakland Park, FL 33309

City, State & Zip

954-815-3871

Daytime Telephone number

zohrav@hotmail.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)

APPROVED  
AND  
FILED

11 APR 18 PM 2:14

**ARTICLE I NAME**

The name of the corporation shall be:

Z-Extreme Fitness & Services, Inc.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
Mailing address, if different

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

212 Lake Pointe Dr apt 102

Oakland Park, FL 33309

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Any Legal and Lawful Purpose

**ARTICLE IV SHARES**

The number of shares of stock is: 500

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Zohra Vayani, President

Name and Title: \_\_\_\_\_

Address: 212 Lake Pointe Dr apt 102

Address: \_\_\_\_\_

Oakland Park, FL 33309

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: Zohra Vayani

Address: 212 Lake Pointe Dr apt 102

Oakland Park, FL 33309

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Zohra Vayani

Address: 212 Lake Pointe Dr apt 102

Oakland Park, FL 33309

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

*Zohra Vayani*

Required Signature/Registered Agent

04/14/2011

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

*Zohra Vayani*

Required Signature/Incorporator

4/14/11

Date