# P11000067912

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

Office Use Only



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W11000037173

## **COVER LETTER**

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

# SUBJECT: South Florida Fitness, Inc.-Palmetto Bay (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

| Enclosed are an original and one (1) copy of the arti | icles of incorporation and a check for:  |
|---|--|
| \$70.00 Filing Fee & Certificate of Status            | \$78.75 \$87.50 Filing Fee Filing Fee, & Certified Copy Certified Copy & Certificate of Status  ADDITIONAL COPY REQUIRED |
| FROM: Tangelia Stephens                               | e (Printed or typed)   |
| 8935 SW 158th Street                                  | Address  |
| Miami, FL 33157                                       | State & Zip  |
| 305,233,9801 Daytime T                                | Telephone number   |
| stephens336@aol.com<br>E-mail address: (to be use     | d for future annual report notification)   |

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



RECEIVED 11 JUL 27 AM 11:02

ECRETARY OF STATE LAHASSEE, FLORIDA

### FLORIDA DEPARTMENT OF STATE Division of Corporations

July 14, 2011

TANGELIA STEPHENS 8935 SW 158TH ST MIAMI, FL 33157

SUBJECT: SOUTH FLORIDA FITNESS, INC.-PALMETTO BAY

Ref. Number: W11000037173

We have received your document for SOUTH FLORIDA FITNESS, INC.-PALMETTO BAY and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6995.

Jessica A Fason Regulatory Specialist II

Letter Number: 411A00016770

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

| ARTICLE I         | NAME South Florida Fitnes  | s, IncPalmetto Bay                       |                                       |
|-------------------|--|--|---------------------------------------|
| The name of the c | corporation shall be:  | -, · · · · · · · · · · · · · · · · · · · |                                       |
| ARTICLE II        | PRINCIPAL OFFICE   |  |                                       |
|                   | Principal street address   | Mailing a                                | ddress, if different is:              |
| ç                 | 9208 sw 156th St.  | 8935 SW 158th                            | St.                                   |
|                   | Miami, FL 33157  | Miami, FL 3315                           | 57                                    |
|                   |  | **************************************   |                                       |
| ARTICLE III       | DIIDDOCP   |  |                                       |
|                   | which the corporation is organized is:   |  |                                       |
|                   | empany that renders professional p   | ersonalized fitness Servi                | ices                                  |
| ,                 | р  |  |                                       |
|                   |  |  |                                       |
|                   |  |  |                                       |
|                   |  |  |                                       |
| ARTICLE IV        | SHARES   |  |                                       |
|                   | ares of stock is:/00   |  |                                       |
|                   |  |  |                                       |
|                   | INITIAL OFFICERS AND/OR DIRECT   |  |                                       |
| Address:          | Fitle: Tangelia Stephens President<br>8935 SW 158th St.  |  |                                       |
| Address.          | Miami, FL 33157  |  |                                       |
|                   | Mani, FL 33137   |  |                                       |
|                   | <del>- · ,</del> · .   |  |                                       |
|                   | Title:   | Name and Title:                          |                                       |
| Address:          |  | Address:                                 |                                       |
|                   |  | <del></del>                              |                                       |
|                   | ····   |  |                                       |
| Name and 1        | Γitle:   | Name and Title:                          |                                       |
| Address:          |  | Address:                                 |                                       |
|                   |  |  |                                       |
|                   |  | <del></del>                              |                                       |
| ARTICLE VI        | REGISTERED AGENT   |  |                                       |
|                   | orida street address (P.O. Box NOT acceptab  | le) of the registered agent is:          |                                       |
| Name:             | Tangelia Stephens  |  | 79.                                   |
| Address:          | 8935 SW 158th ST   |  |                                       |
|                   | Miami, FL 33157  | <del></del>                              | · · · · · · · · · · · · · · · · · · · |
| 4 DOTOL D TITL    | INCORPORATOR   |  | grå 🕮 📲                               |
|                   | Idress of the Incorporator is:   |  | 24 <b>5</b>                           |
| Name:             | Tangelia Stephens  |  | 3/4                                   |
| Address:          | 8935 SW 158 St   |  | ~ (2)                                 |
|                   | Miami, FL 33157  |  |                                       |
|                   |  |  |                                       |
|                   | ned as registered agent to accept service of pr<br>am familiar with and accept the appointment a |  |                                       |
| ть сегијище, г    | im juminur wun unu uccept ine appoiniment a  | s regisiereu ageni una agree io a        | ct in this capacity                   |
|                   | Munder Detter  |  | 06/29/2011                            |
|                   | Required Signature/Registered Agent  |  |                                       |
|                   | required Signature registered Agent  |  | Date                                  |
|                   | ument and affirm that the facts stated herein  |  |                                       |
|                   | Department of State constitutes a third degree j   |  |                                       |
|                   | March 1 Mil  |  |                                       |
|                   | JUNOUNU(1) SHEPT   |  | 06/29/2011                            |
|                   | Required Signature/Incorporator  |  | Date                                  |