

Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : GM FINANCIAL GROUP
 Account Number : 119980000102
 Phone : (954) 428-8899
 Fax Number : (954) 428-6699

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

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
DYNAMIC FITNESS PROGRAMS, INC.

Certificate of Status	0
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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: DYNAMIC FITNESS PROGRAMS, INC.

ARTICLE II PRINCIPAL OFFICE
Principal street address

Mailing address, if different is:

3300 EAST OAKLAND PARK BLVD
FT. LAUDERDALE, FL 33308

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: FITNESS STUDIO

ARTICLE IV SHARES 1000
The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: KELLY DOYLE Name and Title: _____

Address: 3300 EAST OAKLAND PARK BLVD Address: _____
FT. LAUDERDALE, FL 33308

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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01/31/2013 10:00 Kelly

(FAX) 954 566 9551

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(cont.)

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: KELLY DOYLE
Address: 3300 EAST OAKLAND PARK BLVD
FT. LAUDERDALE, FL 33308

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: KELLY DOYLE
Address: 3300 EAST OAKLAND PARK BLVD
FT. LAUDERDALE, FL 33308

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.



Required Signature/Registered Agent

1-29-13

Date

I swear 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 2817.155, F.S.



Required Signature/Incorporator

1-29-13

Date

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