

P14000014607

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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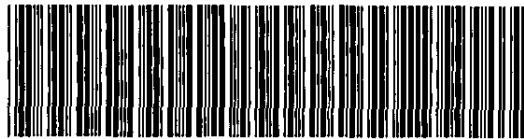
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 FEB 13 AM 9:30

2/18/14

COVER LETTER

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

SUBJECT: **Philip Hall Fitness, 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: **Philip Hall**

Name (Printed or typed)

631 Gentle Breeze Dr.

Address

Minneola, FL, 34715

City, State & Zip

407-405-8305

Daytime Telephone number

phall87@hotmail.com

E-mail address: (to be used for future annual report notification)

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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:

Philip Hall Fitness, Inc.

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ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

14 FEB 13 AM 9:30

631 Gentle Breeze Dr.
Minneola, FL. 34715

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide fitness services including training and consulting and make money.

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Philip Hall, Owner, CEO

Name and Title:

Address

631 Gentle Breeze Dr Minneola, FL 34715

Address:

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

(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: Lori W. Smith, Esq

Address: Zimmerman, Kiser, Sutcliffe, PA

315 East Robinson St Suite 600 Orlando, FL. 32801

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Philip Hall

Address: 631 Gentle Breeze Dr. Minneola, FL. 34715

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

2/7/14
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.


Required Signature/Incorporator

2/11/14
Date

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