## P14000094149

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



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## **COVER LETTER**

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

<sub>subject:</sub> The	Muscle Zone,	Inc.	
	(PROPOSED CORPORA	TE NAME - <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	d 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 CO	PY REQUIRED
		e, Inc.	<del></del>
<u> </u>	230 Taft Street	A 11	
<u>H</u>	ollywood, Florid		
		State & Zip	
(9	54) 673-9989		
	Daytime T	elephone number	
fra	anceeg@gmail.co	m	
<del></del>	E-mail address: (to be use	d for future annual report	notification)

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

## **AFFIDAVIT**

This Affidavit, dated November 12, 2014, hereby states:

The Muscle Zone, Inc., a Florida Profit Corporation, Filing Document Number#P95000036827, and EIN# 650575602, was made "Inactive" and a Dissolution for Annual Report was filed on September 26, 2014. This Corporation will not be reinstated.

New "Articles of Incorporation", dated November 12, 2014 are being filed, and The Muscle Zone, Inc. is the name I would like to use for said Corporation.

Signed November 12, 2014 by:

Keith P. Gillis

President

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

The name of the corporat	ion shall be: The Muscle Zone	e, Inc.	<u> </u>
	NCIPAL OFFICE Principal street address	Ma	ailing address, if different is:
Holywood, F			
ARTICLE III PURI The purpose for which the Personal Tra	POSE ne corporation is organized is: Health ining	Club and I	Fitness Center;
•-•	· ·		
	· · · · · · · · · · · · · · · · · · ·		
	IAL OFFICERS AND/OR DIRECTORS	<del>-</del>	
	Keith P. Gillis, President 1311 North 70th Terrace	· · · · · · · · · · · · · · · · · · ·	
Address	Hollywood, Florida 33024	Address:	
Name and Title:		Name and Title:	
Address		Address:	
	<u> </u>	_	
Name and Title:		Name and Title:	
Address		Address:	

Name an	d Title:	Name and Title:
Address		_ Address:
ARTICLE VI	REGISTERED AGENT	
The name and Fl	orida street address (P.O. Box NOT acceptable) of	f the registered agent is:
Name:	Keith P. Gillis	_
Address:	7230 Taft Street	
	Hollywood, Florida 33024	
ARTICLE VII	INCORPORATOR	
The name and ad	dress of the Incorporator is:	i de la companya del companya de la companya del companya de la co
Name:	Keith P. Gillis	
Address:	1311 North 70th Terrace	7. REPORTS 1. COLUMN 12.
	Hollywood, Florida 33024	***
	ned as registered agent to accept service of process j am familiar with and accept the appointment as regi	s for the above stated corporation at the place designated in gistered agent and agree to act in this capacity
	KIC	11/12/14
•	Required Signature/Registered Agent	Date
	ument and affirm that the facts stated herein are to Department of State constitutes a third degree felony	true. I am aware that the false information submitted in a sy as provided for in s.817.155, F.S.
	LA .	11/12/14
	Required Signature/Incorporator	Date