P15000063168

(Requestor's Name)					
(Address)					
(Ad	dress)				
(Cit	y/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Bu	siness Entity Nar	me)			
(Document Number)					
Certified Copies	_ Certificates	s of Status			
Special Instructions to Filing Officer:					



1/15-4680



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07/06/15--01014--008 **78.75

15 JUL 27 PH 3: 04

mD 7/28

COVER LETTER

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

SUBJECT:	ward and Outward Fitness, Inc.		
SOBJECT:	(PROPOSED CORPOR	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an	original and one (1) copy of the a	rticles of incorporation an	d a check for:
□ \$70. Filing Fo	·	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	OPY REQUIRED
FROM		ne (Printed or typed)	
•	8414 Colton St		
		Address	
	Jacksonville, FL 32221		
	City	, State & Zip	
	904-859-6621		
	Daytime	Telephone number	
	rauccb05@gmail.com		
	E-mail address: (to be us	ed for future annual report	notification)

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



July 13, 2015

CHRISTINA RAUCH 8414 COLTON ST. JACKSONVILLE, FL 32221

SUBJECT: INWARD AND OUTWARD FITNESS, INC.

Ref. Number: W15000046809

We have received your document for INWARD AND OUTWARD FITNESS, INC. 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.

Percentages (%) are not needed.

Please return the corrected original and one copy of 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) 245-6052.

Maryanne Dickey Regulatory Specialist II New Filing Section

Letter Number: 615A00014562

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

he name of the corpora			
RTICLE II PRINC	CIPAL OFFICE Principal <u>street</u> address	Ma	iling address, if different is:
414 Colton St		-	2 P
acksonville, FL 32221			ů,
RTICLE III PURPO	OSE the corporation is organized is:		2000 F
	poration is to provide personal training	ng to clients.	
· · · · · · · · · · · · · · · · · · ·			
RTICLE IV SHAR. The number of shares of RTICLE V INITIA	stock is: AL OFFICERS AND/OR DIRECTOR		
ne number of shares of RTICLE V INITIA Name and Title	stock is: AL OFFICERS AND/OR DIRECTOR Christina Rauch / President	Name and Title:	
the number of shares of	stock is: AL OFFICERS AND/OR DIRECTOR		
ne number of shares of RTICLE V INITIA Name and Title	Stock is: AL OFFICERS AND/OR DIRECTOR Christina Rauch / President 8414 Colton St	Name and Title:	
ne number of shares of RTICLE V INITIA Name and Title Address .	Stock is: AL OFFICERS AND/OR DIRECTOR Christina Rauch / President 8414 Colton St Jacksonville, FL 32221	Name and Title: Address:	
ne number of shares of RTICLE V INITIA Name and Title Address .	Stock is: AL OFFICERS AND/OR DIRECTOR Christina Rauch / President 8414 Colton St	Name and Title: Address: Name and Title:	
ne number of shares of RTICLE V INITIA Name and Title Address . Name and Title	Stock is: AL OFFICERS AND/OR DIRECTOR Christina Rauch / President 8414 Colton St Jacksonville, FL 32221	Name and Title: Address: Name and Title: Address:	
ne number of shares of RTICLE V INITIA Name and Title Address . Name and Title	Stock is: AL OFFICERS AND/OR DIRECTOR Christina Rauch / President 8414 Colton St Jacksonville, FL 32221	Name and Title: Address: Name and Title: Address:	
ne number of shares of RTICLE V INITIA Name and Title Address . Name and Title: Address	Stock is: AL OFFICERS AND/OR DIRECTOR Christina Rauch / President 8414 Colton St Jacksonville, FL 32221	Name and Title: Address: Name and Title: Address:	
ne number of shares of RTICLE V INITIA Name and Title Address . Name and Title: Address	Stock is: AL OFFICERS AND/OR DIRECTOR Christina Rauch / President 8414 Colton St Jacksonville, FL 32221	Name and Title: Address: Name and Title: Address: Name and Title:	

Name a	nd Title:	Name and Title:	
Addres	s	Address:	
•			
	REGISTERED AGENT Florida street address (P.O. Box NOT acceptable)	le) of the registered agent is:	
Name:	Christina Rauch		5
Address:	8414 Colton St		ال <u>ال</u> 2 ال 2
	Jacksonville, FL 32221		
ARTICLE VII	<u>INCORPORATOR</u>		PH 3: 04
The name and a	ddress of the Incorporator is:		12.7 T
Name:	Christina Rauch		
Address:	8414 Colton St		
	Jacksonville, FL 32221		
Effective date, if (If an effective days after the fi	EFFECTIVE DATE: Tother than the date of filing: date is listed, the date must be specific and colling.) e inserted in this block does not meet the application.		
	effective date on the Department of State's reco		,
Having been na This certificate, I	med as registered agent to accept service of pr am familiar with and accept the appointment of	ocess for the above stated corpor is registered agent and agree to a	ration at the place designated in act in this capacity
Hist	inaLauch		6-30-15
	Required Signature/Registered Agent		Date
	cument and affirm that the facts stated herein Department of State constitutes a third degree		
V 11 15	time Laurh		06-30-15
Requ	ired Signature/Incorporator		Date