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## **COVER LETTER**

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

SUBJECT: Gul	f Coast Fitness Fun, Inc.			
	(PROPOSED CORPO	RATE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an	original and one (1) copy of the	articles of incorporation and	d a check for:	
S70.0 Filing Fe		\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
		ADDITIONAL CO	PPY REQUIRED	
FROM:	Denise Moyer Na	me (Printed or typed)		
	121 14th Street			
		Address		
	Belleair Beach, FL 33786			
City, State & Zip				
	916-730-6096			
	Daytimo	e Telephone number		
	funrbgal@yahoo.com			
	E-mail address: (to be u	sed for future annual report	notification)	

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



1		filed
,		INCORPORATION 07 and/or Chapter 621, F.S. (Profit)
	in compliance with enapter of	15 DEC 10 PM 3: 35
ARTICLE I NAM	E Gulf Coast Fitness Fun, ration shall be:	
The name of the corpor	ration shall be:	SECHEIANI OF SIAIC
ARTICLE II PRIN	<u>ICIPAL OFFICE</u>	TALLAHASSEE, FLORIDA
	Principal street address	Mailing address, if different is:
121 14th Street		
Belleair Beach, FL 33	786	
ARTICLE III PURI		
	the corporation is organized is:	***
To provide everyone	in the community with affordable and e	effective personal training and nutrition services to meet
their individual fitnes	s goals.	
ARTICLE IV SHA	<u>RES</u> 10	
The number of shares of	of stock is:	_ <u></u>
<u>ARTICLE V INIT</u>	<u>IAL OFFICERS AND/OR DIRECTOR</u>	<u>25</u>
Name and Ti	Denise Moyer, President	Name and Title:
	121 14th Street	
Address		Address:
	Belleair Beach, FL 33786	
Name and Tit	le:	Name and Title:
Address		Address:
•		
Name and Tie	۰۵۰	Name and Title:
mame and Th		ranc and the.
Address		Address:



Name and Title:		Name and Tit	Name and Title:	
Addres		Address:	15 DEC 10 PM 3: 36	
			SECRETARY OF STATE TALLAHARSEE, FLORIDA	
			MILAHARREE, FLORIDA	
		<del></del>		
ARTICLE VI	REGISTERED AGENT			
The <u>name and I</u>	<u>Iorida street address</u> (P.O. Box <b>NOT</b> acceptable	e) of the registered a	gent is:	
Name:	Denise Moyer	· · · · · ·		
Address:	121 14th Street			
	Belleair Beach, FL 33786		•	
10TICLE 171	ΙΝΙΟΛΙΝΙΚΙ ΑΤΙΚΙ			
AKTICLEVII	<u>INCORPORATOR</u>			
The <u>name and a</u>	ddress of the Incorporator is:			
Name:	Denise Moyer			
Address:	121 14th Street			
	Belleair Beach, FL 33786			
	EFFECTIVE DATE: f other than the date of filing:	. (0	OPTIONAL)	
(If an effective days after the fi	date is listed, the date must be specific and ca	nnot be more than	five business days prior or 90 business	
Note: If the date the document's e	e inserted in this block does not meet the applica effective date on the Department of State's recor	able statutory filing r ds.	requirements, this date will not be listed as	
Having been nat	med as registered agent to accept service of pro am familiar with and accept the appointment as	cess for the above so	tated corporation at the place designated in	
inis cerujicaje, i	am jumular with and accept the appointment as	regisiereu agem un		
	nuse // //agen		12/1/15 Date	
,	Required Signature/Registered Agent			
	ument and affirm that the facts stated herein t Department of State constitutes a third degree fe			
A A	MISI L. MOU. 1. 1	)	12/7/15	
Requi	ired Signature/Incorporator		Date	