

P160000011275

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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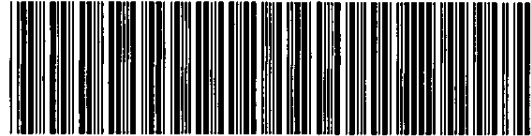
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
16 JAN 25 PM 1:32

JAN 25 2016

S. PRATHER

COVER LETTER

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

SUBJECT: FIT Ventures, 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: Asaon Meadows
Name (Printed or typed)

1258 NW 110th Ave
Address

Plantation, FL 33322
City, State & Zip

407-587-5403
Daytime Telephone number

almeadows13@gmail.com
E-mail address: (to be used for future annual report notification)

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: Fit Ventures Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1258 NW 110th Ave
Plantation, FL 33322

1258 NW 110th Ave
Plantation, FL 33322

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The purpose of Fit Ventures is to provide a husband and wife parent company that will provide both physical fitness and financial fitness solutions to customers.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Asen Meadows

Address: Co-owner/CEO
1258 NW 110th Ave
Plantation, FL 33322

Name and Title: Amanda Aho

Address: Co-owner/CFO
1258 NW 110th Ave
Plantation, FL 33322

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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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: Aaron Meadows

Address: 1258 NW 110th Ave
Plantation, FL 33322

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Aaron Meadows

Address: 1258 NW 110th Ave
Plantation, FL 33322

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ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Aaron Meadows
Required Signature/Registered Agent

1/18/16
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.

Aaron Meadows
Required Signature/Incorporator

1/18/16
Date