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(City/State/Zip/Phone #)

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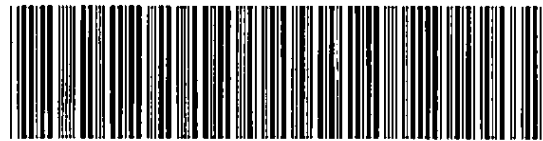
(Business Entity Name)

(Document Number)

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TREASURY & FINANCE

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COVER LETTER

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

SUBJECT: Get Fit 4 You Fitness and Training 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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Stanley Bullard

Name (Printed or typed)

251 W. 11th St.

Address

Riviera Beach, FL 33404

City, State & Zip

561-670-5338

Daytime Telephone number

getfit4you.sb@gmail.com

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

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DEPT. OF STATE
TALLAHASSEE, FL 32314

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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: Get Fit 4 You Fitness and Training Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

251 W. 11th St.

Riviera Beach, FL 33404

Mailing address, if different is:

P. O. Box 17611

West Palm Beach, FL 33407

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: a personal training, sports and training facility that helps individuals

incorporate health, fitness, and trianing skills to improve overall health and physical fitness ability. The personal Training

program is individualized for each person and facilitates group-based problem-solving methods to integrate physical activity

into everyday living. Also, to assist athletes to develop agility, speed and strength. The training programs are designed for

young adults to active senior adults at levels that are safe enough for those who are not active. The group classes include

stretching, balance, low and high impact aerobics, and strength training

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Stanley Bullard, President

Name and Title: _____

Address 251 W. 11th St.

Address: _____

Riviera Beach, FL 33404

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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TALLAHASSEE, FLORIDA

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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: Stanley Bullard _____

Address: 251 W. 11th St. _____

Riviera Beach, FL 33404 _____

ARTICLE VII INCORPORATOR

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

Name: Yolanda Gregory _____

Address: 6990 Oak Bridge Ln _____

Lake Worth FL 33467 _____

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TALLAHASSEE, FLORIDA

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 days prior or 90 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

Stanley Bullard
Required Signature/Registered Agent

10/17/19
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.

Yolanda Gregory
Required Signature/Incorporator

10/17/19
Date