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(Requestor's Name)

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(City/State/Zip/Phone #)

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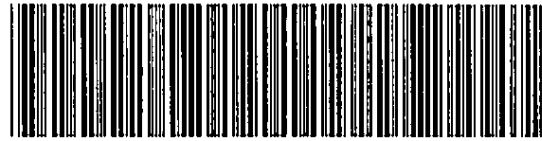
(Business Entity Name)

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FILED  
2020 MAY -5 AM 11:43  
SECRETARY OF STATE  
TALLAHASSEE, FL

**TRANSMITTAL LETTER**

Department of State  
Divisions of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

SUBJECT: RACHAEL GOINS FITNESS, INC

Enclosed is an original and one (1) copy of the articles of incorporation and our check for \$78.75 :

FROM: RACHAEL GOINS  
15284 MOUNT SPARROW ROAD  
WEEKI WACHEE, FL 34614

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OFFICE OF STATE  
TALLAHASSEE, FL

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ARTICLES OF INCORPORATION

RACHAEL GOINS FITNESS, INC

(name of corporation)

The undersigned subscriber(s) to these Articles of Incorporation, natural persons(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

The name of the corporation is:

RACHAEL GOINS FITNESS, INC

ARTICLES II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLES III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLES IV - CAPITAL STOCK

The corporation is authorized to issue one hundred shares ( 100 ) of one Dollar(s) (\$ 1.00 ) par value Common Stock, which shall be designated "Common Shares."

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The principal office, if known, or the mailing address of the corporation is:

NAME RACHAEL GOINS

ADDRESS 15284 MOUNT SPARROW ROAD

CITY WEEKI WACHEE, FL 34614

The name and street address of the Initial Registered Agent of this Corporation is:

NAME RACHAEL GOINS

ADDRESS 15284 MOUNT SPARROW ROAD

CITY WEEKI WACHEE, FL 34614

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TALLAHASSEE, FL

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have one (1) director(s) initially. The number of directors may be either increased or diminished from time to time by the by-laws, but shall never be less than one ( 1 ). The names and addresses of the initial director(s) of the corporation are as follows:

NAME RACHAEL GOINS

ADDRESS 15284 MOUNT SPARROW ROAD

CITY WEEKI WACHEE STATE FL ZIP 34614

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

NAME \_\_\_\_\_

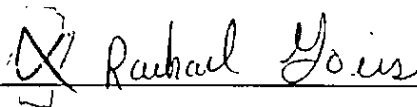
ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

ARTICLE VII - INCORPORATORS

The name(s) and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME RACHAEL GOINS



ADDRESS 15284 MOUNT SPARROW ROAD

CITY WEEKI WACHEE STATE FL ZIP 34614

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

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COUNTY OF STATE  
TALLAHASSEE, FL

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**CERTIFICATE AND ACKNOWLEDGMENT  
OF REGISTERED AGENT**

CERTIFICATE OF REGISTERED AGENT

OF

RACHAEL GOINS FITNESS, INC

(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Corporation

at 15284 MOUNT SPARROW ROAD

WEEKI WACHEE, FL 34614

has named RACHAEL GOINS

located at the aforesaid address as its Registered Agent, to accept service of process within this state.

**ACKNOWLEDGEMENT**

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.



(registered agent)

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CLERK OF STATE  
TALLAHASSEE, FL