

1201 HAYS STREET
MIAMI, FL 33131
305-342-8086
305-342-8087 FAX

800-342-8086



networks

PRINTED MAIL

LEGAL & FINANCIAL SERVICES ACCOUNT NO. : 0721000000032

REFERENCE : 680219 9441A

AUTHORIZATION :

Patricia P. [signature]

COST LIMIT : \$ 122.50

ORDER DATE : September 21, 1995

ORDER TIME : 9:44 AM

ORDER NO. : 680219

CUSTOMER NO: 9441A

CUSTOMER: Mr. Charas Holcomb
ANDY TREUFEL, ESQ

Suite 400
11000 Biscayne Boulevard
Miami, FL 33181

3000015801588

DOMESTIC FILING

NAME: SEC. LAUDERDALE FITNESS, INC.

XXX ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

X CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Karen B. Roman

EXAMINER'S INITIALS:

T. BROWN SEP 25 1995

FILED
95 SEP 22 AM 10:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
OF
FT. LAUDERDALE FITNESS, INC.

FILED
95 SEP 22 AM 10:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporator hereby forms a corporation under Chapter 607 of the laws of the State of Florida.

ARTICLE I. NAME

The name of the corporation shall be:

FT. LAUDERDALE FITNESS, INC.

The address of the principal office of this corporation shall be 18260 Northeast 19th Avenue, Suite 103, North Miami Beach, Florida 33162, and the mailing address of the corporation shall be the same.

ARTICLE II. NATURE OF BUSINESS

This corporation may engage or transact in any or all lawful activities or business permitted under the laws of the United States, the State of Florida or any other state, country, territory or nation.

ARTICLE III. CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 100 shares of common stock having \$1.00 par value per share.

ARTICLE IV. REGISTERED AGENT

The street address of the initial registered office of the corporation shall be 1201 Hays Street, Tallahassee, Florida 32301, and the name of the initial registered agent of the corporation at that address is Corporation Service Company.

ARTICLE V. TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE VI. OFFICERS

The name and addresses of the initial officers of the corporation who shall hold office for the first year of the corporation, or until their successors are elected or appointed are:

George Smith	18260 Northeast 19th Avenue, Suite 103
Pres.	North Miami Beach, Florida 33162

ARTICLE VII. INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation:

Corporation Service Company
1201 Hays Street
Tallahassee, Florida 32301

IN WITNESS WHEREOF, the undersigned agent of
Corporation Service Company, has hereunto set their hand
and seal of Corporation Service Company on September 22, 1995.

CORPORATION SERVICE COMPANY

By: Laura R. Dunlap
Its Agent, Laura R. Dunlap

ACCEPTANCE OF REGISTERED AGENT DESIGNATED
IN ARTICLES OF INCORPORATION

Corporation Service Company, a Delaware
corporation authorized to transact business in this
State, having a business office identical with the
registered office of the corporation named above, and
having been designated as the Registered Agent in the
above and foregoing Articles, is familiar with and
accepts the obligations of the position of Registered
Agent under Section 607.0505, Florida Statutes.

CORPORATION SERVICE COMPANY

By: Laura R. Dunlap
Its Agent, Laura R. Dunlap

CLD/kbr

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION
FOR
REINSTATEMENT**

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

FILED

96 DEC 11 AM 11:36

Read Instructions on Other Side Before Making Entries
Make Check Payable To: **Department of State**

1. Name and Mailing Address of Corporation **DOCUMENT # P 95000073751**

*Fl. Lauderdale Fitness, INC.
3161 NW 69th Street
Fl. Lauderdale, FL 33309*

2. If Address in **FLORIDA** is different from mailing address, enter the correct address below:

Address

City and State

Zip Code

3. If Principal Office Address is different from mailing address, enter

REINSTATEMENT

City and State

Zip Code

4. Date Incorporated or Qualified To Do Business in Florida

9/22/95

5. FEI Number

65-0617300

FEI Number Applied For

FEI Number Not Applicable

6. **\$8.75** Additional Fee required for a Certificate of Status

CERTIFICATE OF STATUS DESIRED ☐

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1. Title(s)	2. Name of Officers and/or Directors	3. Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4. City / State / Zip
<i>P/S/O</i>	<i>George D. Smith</i>	<i>3161 NW 69th St.</i>	<i>Fl. Lauderdale, FL 33309</i>

600002027856--4
-12/12/96--01097--004
******375.00 ****375.00**

JB/2-11-96

REGISTERED AGENT INFORMATION

8. Name and Address of Current Registered Agent

9. If changed, new registered agent / office

Name

George D. Smith

Street Address (Do NOT Use P.O. Box Number)

3161 NW 69th St.

Street Address (Do NOT Use P.O. Box Number)

City

Fl. Lauderdale

State

FL.

Zip

33309

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent

[Signature]

REGISTERED AGENT MUST SIGN

Date *12/6/96*

11. If this corporation is a non-profit with I.R.S. 501(c)(3) tax exempt status, check this box ☐ (See other side for additional information.)

12. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☒ No ☐ (See other side for information on intangible tax.)

13. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., and that all fees owed by the corporation have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Signature of Officer or Director

[Signature]

Date *12/6/96*

Daytime Phone # *954-975-9631*

Typed or printed name of signing officer or director

George D. Smith

CR2040 (6/92)