

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32302
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

P98000099551

Gym-Tastics of the FL
Keys, Inc

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-11/30/98--01021--018
*****78.75 *****78.75

- ☒ Art of Inc. File _____
- ☐ LTD Partnership File _____
- ☐ Foreign Corp. File _____
- ☐ L.C. File _____
- ☐ Fictitious Name File _____
- ☐ Trade/Service Mark _____
- ☐ Merger File _____
- ☐ Art. of Amend. File _____
- ☐ RA Resignation _____
- ☐ Dissolution / Withdrawal _____
- ☐ Annual Report / Reinstatement _____
- ☒ Cert. Copy _____
- ☐ Photo Copy _____
- ☐ Certificate of Good Standing _____
- ☐ Certificate of Status _____
- ☐ Certificate of Fictitious Name _____
- ☐ Corp Record Search _____
- ☐ Officer Search _____
- ☐ Fictitious Search _____
- ☐ Fictitious Owner Search _____
- ☐ Vehicle Search _____
- ☐ Driving Record _____
- ☐ UCC 1 or 3 File _____
- ☐ UCC 11 Search _____
- ☐ UCC 11 Retrieval _____
- ☐ Courier _____

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TALLAHASSEE, FLORIDA

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Signature _____

Requested by: CY

Name

Date 11/30

Time 9:35

Walk-In _____

Will Pick Up _____

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

**ARTICLES OF INCORPORATION
OF**

GYM-TASTICS OF THE FLORIDA KEYS, INC.

The undersigned subscriber to the Articles of Incorporation, a natural person, competent to contract, hereby forms a corporation under the laws of the State of Florida.

The name of the corporation is:

GYM-TASTICS OF THE FLORIDA KEYS, INC.

II. TERM OF EXISTENCE

The Corporation shall exist in perpetuity. The date and time of the commencement of the corporate existence shall be the time of the filing of the Articles of Incorporation by the Department of State.

III. NATURE OF BUSINESS

The general nature of the business is to be conducted by this corporation is limited to:

THIS CORPORATION IS ORGANIZED FOR THE PURPOSES OF CONDUCTING ANY AND ALL LAWFUL BUSINESS ENTERPRISES PERMITTED UNDER THE LAWS OF THE STATE OF FLORIDA, INCLUDING BUT NOT LIMITED TO A GYM AND GYMNASTICS , AND OTHER RELATED SERVICES AND RELATED BUSINESS, OR ANY BUSINESS ACTIVITY.

IV. INITIAL REGISTERED AGENT and ADDRESS

The initial registered agent of the Corporation and his address is : SUSAN L. RICHARDS
30364 QUAIL ROOST TRAIL
BIG PINE KEY, FL 33043

V. PRINCIPAL ADDRESS OF CORPORATION

The PRINCIPAL ADDRESS OF THE CORPORATION is:

30364 QUAIL ROOST TRAIL
BIG PINE KEY, FL 33043

VI. DIRECTORS

This corporation, shall be exercised by a board of 2 director. The number of directors may be increased from time to time by bylaws adopted by the stockholders.

VII. INITIAL DIRECTORS AND OFFICERS

The name and address of the initial director(s) and officers are as follows:

SUSAN L. RICHARDS
30364 QUAIL ROOST TRAIL
BIG PINE KEY, FL 33043
D/P/T

GERALYN M. ALLEN
30364 QUAIL ROOST TRAIL
BIG PINE KEY, FL 33043
D/VP/S

VIII. INCORPORATOR

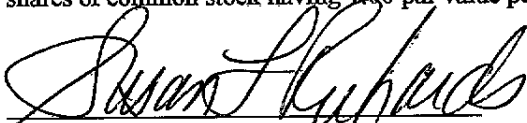
The incorporator is: SUSAN L. RICHARDS

IX. AMENDMENT

The Articles of Incorporation may be amended in the manner provided by law. Every amendment shall be approved at a stockholders meeting by a majority of the stockholders entitled to vote thereon, unless all of the Directors and all of the stockholders sign a written statement manifesting their intention that a certain amendment of the Articles of Incorporation be made.

X. 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.


SUSAN L. RICHARDS, DIRECTOR


GERALYN M. ALLEN, DIRECTOR

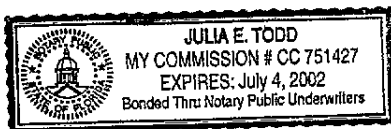
STATE OF FLORIDA
COUNTY OF MONROE

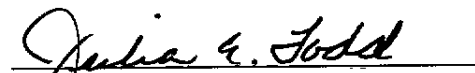
I HEREBY CERTIFY that on this day personally appeared before me, an officer duly authorized to administer oaths and take acknowledgments, SUSAN L. RICHARDS and GERALYN M. ALLEN, to me known to be the individuals described in and who executed the foregoing and acknowledged before me that they executed the same freely and voluntarily for the purposes therein expressed.

IN WITNESS WHEREOF, I hereunto set my hand and official seal at 3121 1/2 Avenue A, Big Pine Key, said County and State, this ____ day of _____, 1998. They are ☒ personally known or have produced _____ as identification.

(Seal)

My Commission Expires:




Notary Public, State of Florida
Julia E. Todd

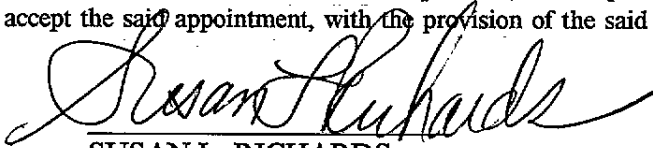
CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE
SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT
UPON WHOM PROCESS MAY BE SERVED

In pursuant of Chapter 48.089, Florida Statutes, the following is submitted in compliance with said act:

FIRST - GYM-TASTICS OF THE FLORIDA KEYS, INC. , desiring to organize under the laws of the State of Florida, with its principal corporate office at 30364 Quail Roost Trail, Big Pine Key, FL 33043 and the office of the Registered Agent, as indicated in the Articles of Incorporation, at 30364 Quail Roost Trail, Big Pine Key, FL 33043, named Susan L. Richards, as its agent to accept service of process from the state.

ACKNOWLEDGMENT:

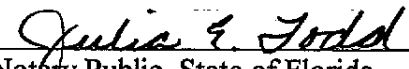
Having been named to accept service of process for the above-stated corporation, at the place designated in the Certificate, I, the undersigned, hereby accept the said appointment, with the provision of the said act, as to keeping open said office.


SUSAN L. RICHARDS

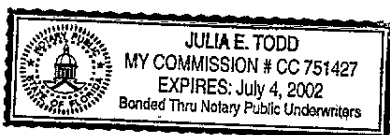
STATE OF FLORIDA
COUNTY OF MONROE

I HEREBY CERTIFY that on this day personally appeared before me, an officer duly authorized to administer oaths and take acknowledgments, Susan L. Richards, to me known to be the individual described in and who executed the foregoing and acknowledged before me that he, executed the same freely and voluntarily for the purposes therein expressed.

IN WITNESS WHEREOF, I hereunto set my hand and official seal in the county of Monroe, State of Florida,
20th day of November 1998. He is ☒ personally known or has produced the following form of picture
identification: _____


Notary Public, State of Florida
Julia E. Todd

My Commission Expires:



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98 NOV 30 PM 12:38
STATE OF FLORIDA
TALLAHASSEE