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No More Excuses Gym Wear, Inc. 10151 University Blvd., #353 Orlando, FL 32817 100002796161——3
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Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1	(Corporation		Documen	t #)			
2. (Corporation Name)			(Document #)				
3	(Corporation	·		Documen	t #)		
4	(Corporation			Documen	·		
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Other

Examiner's Initials

ARTICLES OF INCORPORATION FOR NO MORE EXCUSES GYM WEAR, INC.

ARTICLE ONE - NAME

The name of the corporation shall be "No More Excuses Gym Wear, Inc...

ARTICLE TWO - PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation shall be,
10151 University Blvd., #353
Orlando, Florida 32817

99 MAR -5 PH 2:30
SECRE LARY OF STATE
TAIL A HASSEE, FLORID

ARTICLE THREE - SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one thousand.

ARTICLE FOUR - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:
Harry Martin, 2314 River Park Circle, #2111,
Orlando, FL., 32817-4828.

ARTICLE FIVE - INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are: Dianne Martin, 2314 River Park Circle, #2111, Orlando, FL., 32817-4828.

Signature/Incorporator

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:

NO MORE EXCUSES GYM WEAR, INC.

2. The name and address of the registered agent and office is:

Harry Martin 2314 River Park Circle, #2111 Orlando, Florida 32817-4828 99 MAR -5 PM 2: 30
SECHE INNY OF STATE
TALL AHASSEF, FLORID.

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature/Registered Agent

Date