

P24000050591

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

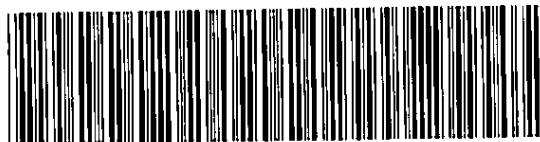
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer

Office Use Only



800433250288

FILED

2024 AUG -7 AM 9:47

STATE  
TALLAHASSEE, FL

RECEIVED

2024 AUG -7 PM 3:37

SECRETARY  
TALLAHASSEE, FLORIDA



CSC - Tallahassee  
1201 Hays Street  
Tallahassee, FL 32301-2607  
850-558-1500, Ext: x62969

To: Department Of State, Division Of Corporations  
From: Amanda Miller  
Ext: x62969  
Date: 08/07/24  
Order #: 1584688-1  
Re: FITNESS QUEST HOLDCO, INC.  
Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Certificate of Formation/Incorporation

Amount to be deducted from our State Account: \$70,000 - FL State Account Number:

I20000000195

AUTH

Please take the following action:

File in your office on basis

Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

DEPARTMENT OF STATE  
TALLAHASSEE, FL

2024 AUG - 7 AM 9:47

FILED

## COVER LETTER

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

**SUBJECT:** Fitness Quest Holdco, 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:** Jason Nippert  
Name (Printed or typed)  
3657 Cortez Rd W, Suite 110  
Address  
Bradenton, FL 34210  
City, State & Zip  
(941) 320-8396  
Daytime Telephone number  
jnippert@fitnessquestpt.com  
E-mail address: (to be used for future annual report notification)

FILED  
2024 AUG -7 AM 9:47  
TALLAHASSEE, FL  
DEPT OF STATE

**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: Fitness Quest Holdco, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal <u>street</u> address	Mailing address, if different is:
<u>1705 S Osprey Ave.</u>	<u>3657 Cortez Rd W Suite 110</u>
<u>Sarasota, FL 34239</u>	<u>Bradenton, FL 34210</u>

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: any and all lawful business.

**ARTICLE IV SHARES**

The number of shares of stock is: 1,000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: <u>Jason Nippert, CEO</u>	Name and Title: <u>Dr. Robert H Nippert, VC</u>
---	---

Address <u>3657 Cortez Rd W Suite 110</u>	Address: <u>3657 Cortez Rd W Suite 110</u>
<u>Bradenton, FL 34210</u>	<u>Bradenton, FL 34210</u>

Name and Title: _____	Name and Title: _____
-----------------------	-----------------------

Address _____	Address: _____
---------------	----------------

Name and Title: _____	Name and Title: _____
-----------------------	-----------------------

Address _____	Address: _____
---------------	----------------

FILED  
2021 AUG -7 AM 9:47  
STATE  
HALL/MI/SS/EE, FL

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: Corporation Service Company  
Address: 1201 Hays Street  
Tallahassee, FL 32301

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Alex M. Kaminski  
Address: 45 Ottawa Avenue SW, Suite 1100  
Grand Rapids, MI 49503

**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*

*Shauna Godbolt*

Required Signature/Registered Agent

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.*

*Shawn Miller*

Required Signature/Incorporator

Date 8/7/2024

FILED  
2024 AUG -7 AM 9:47  
TALLAHASSEE, FL  
FLORIDA DEPT. OF STATE