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KIPNIS TESCHER

001/003

Division of Corporations

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Florida Department of State

Division of Corporations

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : KIPNIS TESCHER LIPPMAN & VALINSKY

Account Number : 072164000350

Phone : (954)467-1964

Fax Number : (954)467-2264

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FLORIDA
TALLAHASSEE, FLORIDA

01 JUL 24, PM 1:49

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LIMITED LIABILITY COMPANY

Color Reflections of Fort Lauderdale LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

**ARTICLES OF ORGANIZATION
of
COLOR REFLECTIONS OF FORT LAUDERDALE LLC**

ARTICLE I - Name:

The name of the Limited Liability Company is: Color Reflections of Fort Lauderdale LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:
3901 S.W. 47th Avenue, Suite 400, Fort Lauderdale, FL 33314.

ARTICLE III - Duration:

The Limited Liability Company's existence shall be perpetual unless its existence is sooner dissolved as provided by this Agreement.

ARTICLE IV - Management:

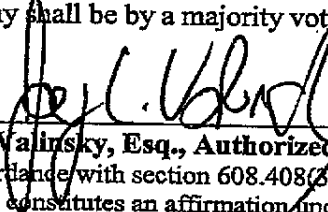
The Limited Liability Company is to be managed by a manager.

ARTICLE V - Admission of Additional Members:

The right of the members to admit additional members and the terms and conditions of the admissions shall be by consent of a majority-in-interest of the existing Members.

ARTICLE VI - Members' Rights to Continue Business:

The right of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be by a majority vote of the remaining members.


Jay L. Valinsky, Esq., Authorized Representative

(In accordance with section 608.408(2), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

FILED

01 JUL 24 PM 2:00

TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: Color Reflections of Fort Lauderdale LLC
2. The name and the Florida street address of the registered agent are:

Kipnis Tescher Lippman & Valinsky, P.A.
100 Northeast Third Avenue, Suite 610
Fort Lauderdale, FL 33301-1165

Having been named as registered agent and to accept service of process for the above stated limited liability company 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.

KIPNIS TESCHER LIPPMAN & VALINSKY, P.A.

By: 

Jay L. Valinsky, Esq., Vice President

Fax Audit #: H01000084160 0

Prepared by: Kipnis Tescher Lippman & Valinsky
100 NE Third Avenue, Suite 610
Fort Lauderdale, FL 33301
(954) 467-1964

Jay L. Valinsky, FL Bar No.: 0625109