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JENNIFER J. HUME, CPA PA  
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Fort Lauderdale, FL 33339-1700  
(954)786-7719 or Cell (954)560-7292

Registration Section  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

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-03/15/00--01107--004  
\*\*\*\*160.00 \*\*\*\*160.00

Re: ROBERT ALLEN ECHO SALON, L.L.C.

Dear Sir or Madam:

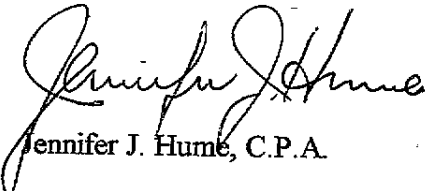
I am enclosing the following:

1. Articles of Organization for Florida Limited Liability Company.
2. A check for \$160.00 representing filing fees, designation of registered agent, certified copy and certificate of status.

I would appreciate receiving the certified copy as soon as possible so that I may obtain a federal identification number.

Thank you.

Sincerely,

 CPA  
Jennifer J. Hume, C.P.A.

FILED  
00 MAR 15 AM 8:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

ROBERT ALLEN ECHO SALON, L.L.C.

## ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

3334 N.E. 32 ST

FORT LAUDERDALE, FL 33308

## ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

LAWRENCE CALDWELL

Name

4501 NE 21 AVE # 214

Florida street address (P.O. Box **NOT** acceptable)

FORT LAUD FL 33308

City, State, and Zip

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 as provided for in Chapter 608, F.S..

Lawrence Caldwell

Registered Agent's Signature

## Article IV - Management (Check box if applicable.)

☒ The Limited Liability Company is to be managed by one manager or more managers and is therefore, a manager - managed company.

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00 MAR 15 2 18 34  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

(An additional article must be added if an effective date is requested)

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Jennifer L. Home CPA

Typed or printed name of signee

### FILING FEES:

- \$ 100.00 Filing Fee for Articles of Organization
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (OPTIONAL)
- \$ 5.00 Certificate of Status (OPTIONAL)