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TRANSMITTAL LETTER

FL. DEPT OF STATE
DIVISION OF CORPORATIONS
PO BOX 6327
TALLAHASSEE, FL 32314

400004578324--4
-09/10/01--01096--016
***125.00 ***125.00

SUBJECT: Amethyst Center OF the Spirit, LLC

I ENCLOSE AN ORIGINAL OF THE ARTICLES OF ORGANIZATION FOR THE ABOVE LIMITED LIABILITY COMPANY AND A CHECK IN THE AMOUNT OF \$ 125-00

FROM: Kyra Russell
616 Ashe St.
Key West, FL 33040
(305) 294-4613
TELEPHONE NUMBER

00308. ⁰²⁸²⁷ -- 02870 - 00671

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
01 SEP 10 AM 9:35

W9/13

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1-NAME

THE NAME OF THE LIMITED LIABILITY COMPANY IS:

AMETHYST CENTER ~~OF~~ THE SPIRIT, LLC

ARTICLE 2-Address

The mailing address and street address of the principal office of the Limited Liability Company is:
616 ASHE ST
Key West, Fl. 33040

ARTICLE 3- Duration

The period of duration for the Limited Liability Company is perpetual.

ARTICLE 4- Management

The Limited Liability Company is to be managed by the members and the names and addresses of the managing members are:

KYRA RUSSELL
616 ASHE ST
Key West, Fl 33040

DOROTHEA DELGADO
1107 KEY PLAZA # 302
Key West, Fl. 33040

ARTICLE V-Admission of Additional Members:

No person shall be admitted as a member unless each member consents in writing to the admission of the additional member.

ARTICLE VI-Members Rights to Continue Business

The right, if given, 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 granted if, within 180 days of such event, the Company is continued by the unanimous vote or written consent of all the remaining Members.


SIGNATURE OF MEMBER (KYRA RUSSELL)

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**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: _____

Amethyst Center OF the Spirit, LLC.

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

Kyra Russell

NAME

616 Ashe St.

Florida street address (P. O. Box NOT ACCEPTABLE)

Key West, FL 33040

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.

Kyra Russell

SIGNATURE

Filing Fee: \$ 35 for Designation of Registered Agent

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01 SEP 10 AM 9:05