## L0200001330(

## TRANSMITTAL LETTER

May 16, 2002

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 500005621855--0 -05/28/02--01076--001 \*\*\*\*155.00 \*\*\*\*155.00

Subject: haircolorxpress Development Partners of the Carolinas, LLC

Enclosed is an original and one (I) copy of the Articles of Organization for Florida Limited Liability Company and a check in the amount of \$155.00 for the corporate filing fee and certificate and Designation of Registered Agent.

From:

Joel A. Shor, CPA 3164 St. Annes Place Boca Raton, FL 33496 561-994-3315

OZ MAY 28 AN 10: 24
SECRETARY OF STATE
TALL ALLASSES

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	ARTICLE I - Name:	
	The name of the Limited Liability Company is:	
r	vaircolor x press Development Partners of the	
ı	ARTICLE II - Address: COYO MOS, LLC The mailing address and street address of the principal office of the Limited Liability Company is:	
	The maining address and street address of the principal office of the Limited Liability Company is:	
	1620 1 12 1001 11 10 102 2 1/L L L	
	HUNTUSYING, NC 28078	
	HUNHUSYINC, NC 28078 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:	
	The name and the Florida street address of the registered agent are:	
	1001 N Cha ( No.	
	JUCI H. SNOY, CPH	
	3164 St. Anne & DIALE	
	Plorida street address (P.O. Box NOT acceptable)	
	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	
	statutes relating to the proper and complete. 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	
	The state of the desired agent as provided for in Chapter 608, F.S	
	Registered Agent's Signature	
	Article IV - Management (Check box if applicable.)	
	110 Difficultion Liantiffy Company is to be many 11	
	therefore, a manager - managed company.	
	A. I.	
	WAS	$\Box$
	(An additional article must be added if an effective date is requested)	1
	Signature of a member or an authorized representative of a member.	انت
	(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation and Statutes, the execution	
	of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)	
	Manoi Daya	
	Typed of 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)