

L020000 18485

TRANSMITTAL LETTER

July 9, 2002

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

300006548863--4
-07/22/02--01039--011
****155.00 ****155.00

Subject: haircolorxpress Development Partners of Ohio, LLC

Enclosed is an original and one (1) 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

BK

FILED
02 JUL 22 AM 10:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

~~102000044796~~

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

haircolorxpress Development Partners of Ohio, LLC

ARTICLE II - Address:

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

16507-D Northcross Drive
Huntersville, NC 28078

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

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

Joel A. Shor
Name
3164 St. Annes Place
Florida street address (P.O. Box NOT acceptable)
Boca Raton FL 33496
City, State, and Zip

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TALLAHASSEE, FLORIDA

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..

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.

(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.)

Mandi Daya

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)