

Division of Corporations

LO2 000026336

Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850) 205-0383

From:
Account Name : A 1 A CORPORATE SERVICES, INC.
Account Number : I20010000247
Phone : (305) 673-0347
Fax Number : (305) 532-0738

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02 OCT - 7 PM 3: 26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

Serenity Massage, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

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ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608, F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:

Serenity Massage, LLC

ARTICLE II ADDRESS

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

1531-3 Monument Rd.
Jacksonville, Florida 32225

ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

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

Nicole Jenkins
1531-3 Monument Rd.
Jacksonville, Florida 32225

Having been named as registered agent 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.

Nicole Jenkins

Registered Agent's Signature

ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one member or more members and is, therefore, member - managed company.

ARTICLE V MEMBERS

Managing Member : Nicole Jenkins
4104 Skycrest Dr. Jacksonville, Florida 32248

Managing Member : Dr. Donna DeAngelis
12528 Belmont Lakes Dr. Jacksonville, Florida 32225

Managing Member : Andrew DeAngelis
12528 Belmont Lakes Dr. Jacksonville, Florida 32225

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Nicole Jenkins

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

(In accordance with section 808.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

Nicole Jenkins

Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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