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### Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 : (305)634-3694

Fax Number 1 (305)633-9696

## LIMITED LIABILITY COMPANY

hemispheres beauty salon, lic

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00





#### ARTICLES OF ORGANIZATION OF

#### HEMISPHERES BEAUTY SALON, LLC

#### ARTICLEI

The KILL OF THE CORONAL SS The name of the limited liability company ("Company") is HEMISPHERES BEAU SALON ILC.

#### ARTICLE II Address

The mailing and street address of the Company's principal office is 1980 S. Ocean Drive. Hallandale, Florida 33009

#### ARTICLE III Duration

The period of duration for the Company is perpetual beginning on the date these Articles of Organization are filed by the Florida Department of State.

#### ARTICLE IV Registered Agent and Office

The name of Company's initial registered agent in Florida is SHIRLEY RAGONESE WISE. The address of Company's registered office in Florida is 1980 S. Ocean Drive. Hallandale, Florida 33009.

#### ARTICLE V Management

The Company is to be managed by the members. Each managing member is identified as follows:

SHIRLEY RAGONESE WISE

50%

PHILIP WISE

50%

#### ARTICLE VI Admission of New Members

Members of the Company have the right to admit new members. Additional members may be admitted only by the unanimous written consent of the existing members, and the existing members shall determine the amount and nature of contribution by the new members are admitted.

#### ARTICLE VII

The remaining members of the Company have the right 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 Company. The business may continue only on the unanimous written consent of the remaining members.

IN WINESS WHEREOF, we have executed as of	ted these Articles of Organization on this 1900 iami-Dade County, Florida.
Signed in the presence of:	
MANA PERE HAMI	
Deene audil	SHIRLEY RAGONESE WISE
Dinted Name: Diana Acetal  Warya PRATS HAMILIA	I Me Me.
Degu Outel	PEULIP WISE
Printed Name: Drang ACEBAL	

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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 in designating the registered office/registered agent, in the State of Florida:

- (1) The name of the limited liability company is HEMISPHERES BEAUTY SALON, LLC.
- (2) The name and address of the registered agent and office is: Shirley Rayonese Wise, 1980 S. Ocean Drive, Hallandale, Florida 33009.

Having been named as registered agent and to accept service of process for the abovenamed 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 statues relating to the property and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Dated: 5/19/3

Akagonese Wise

