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DIVISION OF CURPORATION

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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations

SUBJECT: WOrld Class Hair + Nail Salon LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Renae Rollins (Name of Person)
World Class Hair & Mail Salon (Firm/Company)
1433 Lake Bradforded
(Address) Tall. Fla 33310 (City/State and Zip Code)

For further information concerning this matter, please call:

Rosalind V. Townki 850 933-20

ame of Person) (Area Code & Daytime Telephone Nun

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS:

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

ARTICLE I - Name: The name of the Limited Liability Company is:	world Class Hair + Nail Salor
ARTICLE II - Address: The mailing address and street address of the princ	cipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1433 Lake Bradforded Tall Sta. 32301	605 Hampton Aus Tall Fla. 32310
ARTICLE III - Registered Agent, Registered O	ffice, & Registered Agent's Signature:
The name and the Florida street address of the reginner of the region	stered agent are: OCT 30 PF CORPC AM
605 Hampton Florida street address (P.O. B	AU 8: STATE
Tall	7 32360

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

City, State, and Zip

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager	Name and Address:	
"MGRM" = Managing Member W G R	Renae Rolling 1605 Nampton Are Tall Fla. 32310	
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(Use attachment if necessary)		CORPORA

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

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.)

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)