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SECRETARY OF STATE DIVISION OF CORPORATIONS

### TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Massage Staffing (Name of Limited Liab	ility Company)
The enclosed Articles of Organization and fee(s) are submitted	ed for filing.
Please return all correspondence co	ncerning this matter to the following:
Dena Dahlqui	ST Person)
Massage Staffing	Inpany)
1799 N. Highland Qu	1e. #91 dress)
Clearwater, FL (City/State &	33755 and Zip Code)
For further information concerning this matter, please call:	
Dena Dahlauist at (	(Area Code & Daytime Telephone Number)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street	(Area Code & Daytime Telephone Number)  WSECRETARY OF STATE  AM 1: 28  MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327

Tallahassee, Florida 32314

Tallahassee, Florida 32399

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:	
Massage Staffing, L	LC
ARTICLE II - Address: The mailing address and street address of the principle.	cipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1799 n. Highland Que. #91	1799 n. Highland Que. #91
Clearwater, FL 33755	Clearwater, FL 33755
	<del></del>
ARTICLE III - Registered Agent, Registered Control The name and the Florida street address of the reg	
Dena Dahlquis	st
1799 N. Hahlav Florida street address (P.O. F	Od Qve.#91  Box NOT acceptable)  SECRETARY
Clearwater City, State, and	Sox NOT acceptable)  FLORIDA 33755  FLORIDA 33755
Having been named as registered agent and to accept service company at the place designated in this certificate, I hereby agree to act in this capacity. I further agree to comply with the and complete performance of my duties, and I am familiar was registered agent as provided for in Charles	accept the appointment as registered agent and the provisions of all statutes relating to the proper with and accept the obligations of my position as
Qena Oahla Registered Agent's	ignature

Page 1 of 2 (CONTINUED)

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ARTICLE IV- Manager(s) or Managing Member(s):	
The name and address of each Manager or Managing Member is a	ìS

Name and Address:

follows:

"MGR" = Manager "MGRM" = Managing Member	
MGRM	Dena Dahlquist 1799 N. Highland Ave. # Clearumter FL 33755
(Use attachment if necessary)	
NOTE: An additional article must be	added if an effective date is requested.
REQUIRED SIGNATURE:	
_ Dena Dahl	auot -
Signature of a member or an au	morized representative of a member.
(In accordance with section 608.4 of this document constitutes an at that the facts stated herein are tru	408(3), Florida Statutes, the execution firmation under the penalties of perjury e.)
<u> Dena Dahla</u> Typed or prin	TUIST Inted name of signee

### Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

Title:

\$ 5.00 Certificate of Status (Optional)