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| . (Requestor's Name) | | | | |
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| (Address) | | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP WAIT MAIL | | | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies Certificates of Status | | | | |
| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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TALLAHASSEE FLORIDA

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TRANSMITTAL LETTER

| TO: Registration Se Division of Cor | | ·· | . | |
|--|--|---|--|--|
| SUBJECT: | IVAN HAIR STUDIO (Name of Limite | & SPA, LLC d Liability Company) | | |
| The enclosed Articles of | Organization and fee(s) are s | ubmitted for filing. | | |
| Please return all correspondent | ondence concerning this matte | er to the following: | | |
| CHRISTI | NA PETTYS | | · | |
| | (1 | Name of Person) | | |
| | ANY COUNTY | | W05- | 17407 |
| LEDGERPLUS OF E | | Firm/Company) | | |
| | (| rirm/Company) | | |
| | AS DRIVE #1110A | (Address) | | |
| PANA | MA CITY BEACH, FL 324 | | | |
| | (City | /State and Zip Code) | | SE 05 |
| For further information of | concerning this matter, please | call: | | HAR 28 PH CRETARY OF S LAHASSEE FI |
| CHRISTINA PETTYS | | at (⁻⁸⁵⁰) 235-i | 6221 | |
| (Name | of Person) r the following amount: | (Area Code & Day | time Telephone Num | 11_ED 28 PN 4: 07 TARY OF STATE ASSEE FLORIDA |
| □ \$125.00 Filing Fee | Ø \$130.00 Filing Fee & Certificate of Status | ☐ \$155.00 Filing Fe Certified Copy (additional copy is enclose | Certificat sed) Certified | te of Status & |
| Regist Divisi 409 E. | ET ADDRESS: ration Section on of Corporations Gaines Street assee, Florida 32399 | Registra Division P.O. Bo | ING ADDRESS: ation Section n of Corporations ox 6327 ssee, Florida 32314 | . 4 |



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

April 6, 2005

CHRISTINA PETTYS LEDGERPLUS OF BAY COUNTY 8730 THOMAS DRIVE #1110A PANAMA CITY BEACH, FL 32408

SUBJECT: IVAN HAIR STUDIO & SPA, LLC

Ref. Number: W05000017407

We have received your document for IVAN HAIR STUDIO & SPA, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Chapter 608, Florida Statutes, does not allow limited liability companies to issue shares or stock. Consequently, limited liability company documents cannot contain any references/terms which may implicate otherwise. Please delete any references to terms such as "shares," "stock," "stockholders," "shareholders" or the like from your document.

Please also note that we are returning the IRS form you submitted because it is not filed with the Department of State.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6958.

Letter Number: 405A00023380

Lee Rivers Document Specialist 05 MAR 28 PM 4: 07
SECRETARY OF STATE
TALLAHASSEE FLORIS

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

| The name of the Limited Liability Compan | y is: |
|---|--|
| IVAN HAIR STUDIO & SPA, LLC | |
| ARTICLE II - Address: The mailing address and street address of the | he principal office of the Limited Liability Company is: |
| Principal Office Address: | Mailing Address: |
| 481 BECHRICH ROAD | SAME |
| PANAMA CITY BEACH, FL 32407 | >S S |
| ARTICLE III - Registered Agent, Regist The name and the Florida street address of IVAN ESQUIVEL | the registered agent are: |
| | Name - RAT 9 |
| 481 BECHRICH ROAD | |
| Florida stre | et address (P.O. Box NOT acceptable) |
| PANAMA CITY BEACH, 3 | 32407 _{FL} |
| | tate, and Zip |
| ** | |

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

(CONTINUED)

Page 1 of 2

OH OF

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 "MGRM" = Managing Member | Name and Address: |
|--|--|
| Q Q | IVAN ESQUIVEL |
| MGRM | 418 BECHRICH ROAD |
| | PANAMA CITY BEACH, FL 32407 |
| | THANK OF TELEPOOR, TE OLAST |
| MGRM | ROSIO ESQUIVEL |
| | 418 BECHRICH ROAD |
| | PANAMA CITY BEACH, FL 32407 |
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| (Use attachment if necessary) | TATE ORIDA |
| NOTE: An additional article must be | added if an effective date is requested. |
| REQUIRED SIGNATURE: | |
| | |
| Signature of a member o | r an authorized representative of a member. |
| (In accordance with section of this document constitute that the facts stated here | on 608.408(3), Florida Statutes, the execution es an affirmation under the penalties of perjury in are true.) |
| IVAN ESQUIVEL | |
| Турес | or printed name of signee |
| Filing Feec | |

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

Article V - Duration

The period of duration for the Limited Liability Company shall commence April 1, 2005 and shall terminate upon dissolution pursuant to the provisions of the Florida limited Liability Company Act.

Article VI - Purpose

The purpose for which the Limited Liability Company is organized is to engage in any and all lawful businesses and activities permitted by the laws of the State of Florida. The Limited Liability Company shall have all of the powers vested in a Limited Liability Company organized and existing by virtue of such laws, including, but not limited to, the power to invest in real estate.

Article VII - Admission of Additional Members

Members may be admitted upon approval of a majority in interest of the members.

SECRETARY OF STATE