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To:

JUL-15-2005 02:23 FROM: AFFORD PRO SERVS

Division of Corporations

: (850)205-0383 Fax Number

From:

: AFFORDABLE PROFESSIONAL SERVICES, INC. Account Name Account Number: I20000000264 : (954)565-9929 Phone : (954)565-1347 Fax Number

LIMITED LIABILITY COMPANY

Spiral Sisters, LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

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(((H05000171522 3)))

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

KNOW ALL MEN BY THESE PRESENTS that the undersigned, desiring to form a Limited Liability Company for the purpose of engaging in any lawful act or activity for which companies may be organized under the Florida Limited Liability Company Act, do hereby sign, verify and deliver to the Secretary of State of the State of Florida these Articles of Organization.

ARTICLE I - Name:

The name of the Limited Liability Company is: Spiral Sisters, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 9757 North Springs Way
Coral Springs, FL 33076

ARTICLE III - Period of Duration:

The Company shall exist perpetually from and after the date that the Secretary of State of the State of Florida issues a Letter of Acknowledgment, unless dissolved according to law.

ARTICLE IV - Initial Members

The initial Members of the Limited Liability Company are:

Kathy Goodman

Felicia S. Price

9757 North Springs Way

5066 NW 104th Avenue

Coral Springs, FL 33076

Coral Springs, FL 33076

ARTICLE V - Management:

The Limited Liability Company is to be managed by the members.

ARTICLE VI - Limited Liability Company Operating Agreement:

The regulation of the Company is more particularly set forth in the Limited Liability Company Operating Agreement.

ARTICLE VII - Capital Contribution:

The initial members have contributed capital as is listed in the Company's Operating Agreement.

ARTICLE VIII - Admission of Additional Members subsequent to Organization:

The existing members shall have the right to admit additional members to the Company upon such terms and conditions as the existing and additional members shall jointly agree at their sole discretion. Any member who is subsequently admitted as a member of the Company shall have all the rights and obligations of a member as those rights and obligations are documented in the Limited Liability Company Operating Agreement.

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ARTICLE IX - Continuation of Business upon Death or Withdrawal of a Member: Upon either death or withdrawal of any member, the remaining members shall have the right to choose either to purchase the interest of the deceased or withdrawing member or to dissolve the company. In the event of an election to purchase the interest of a deceased or withdrawing member, the purchase price for said interest shall be paid and determined as documented in the Limited Liability Company Operating Agreement.

ARTICLE X - Transferability of Interests:

No interest in the Company may be transferred except as specifically set forth in the Limited Liability Company Operating Agreement.

ARTICLE XI - Amendments and Revisions:

The Articles of Organization may be modified, revised or amended if the modification(s), revision(s) or amendments are made in writing, signed by all members then in existence and filed with the Secretary of State of the State of Florida according to law.

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.)

Stephen D. McCullough, CLA Typed or printed name of signee

Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:

> Stephen D. McCullough, CLA Name

1301 East Oakland Park Boulevard
Florida street address (P.O. Box NOT acceptable)

Fort Lauderdale. Florida 33334 City, State, 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, Florida Statutes.

Degistered Agent's Signature (((H05000171522 3)))