

To: FL Dept. of State
Subject: 000937.51684

From: Katie W. Bosch

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L06000046290

Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)205-0383

From:
Account Name : CORPDIRECT AGENTS, INC.
Account Number : 110450000714
Phone : (850)222-1173
Fax Number : (850)224-1640

000937.51684

FLORIDA/FOREIGN LIMITED LIABILITY CO

BLUE DOOR SPA, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

DIVISION OF CORPORATION

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TALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION
OF
BLUE DOOR SPA, LLC
A Florida Limited Liability Company**

ARTICLE I - Name

The name of the limited liability company is **BLUE DOOR SPA, LLC** (the "Company").

ARTICLE II - Principal Office

The mailing address and street address of the principal office of the Company is 515 East Park Avenue, Tallahassee, Leon County, FL 32301.

ARTICLE III - Duration

The period of duration for the Company shall be perpetual.

ARTICLE IV - Management

The Company is to be managed by the manager and the name and address of the initial manager is:

ANIRE OKPAKU

ARTICLE V - Admission of Additional Members

The limited liability company shall have at least one (1) member. The limited liability company may admit additional members in accordance with the provisions of the operating agreement of the company.

ARTICLE VI - Members' Rights to Continue Business

The death, retirement, resignation, expulsion, dissolution, bankruptcy, dissociation or withdrawal of any member, or the occurrence of any other event that terminates the continued membership of any member shall not cause the Company to be dissolved or its affairs to be wound-up, and upon the occurrence of any such event, the Company shall be continued without dissolution and without any affirmative action or requirement on the part of the members.


STEFANIE A. BLACK,
Authorized Representative

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**CERTIFICATE OF DESIGNATION
OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.407 OR 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, 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 **BLUE DOOR SPA, LLC.**
2. The name and Florida street address of the limited liability company's registered agent is CorpDirect Agents, Inc., 515 East Park Avenue, Tallahassee, Leon County, FL 32301.

Having been named as registered agent and to accept service of process for the above-stated limited liability company at the place designated by 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 the obligations of my position as a registered agent.

CORPDIRECT AGENTS, INC.

By: _____

Ed Carey
Print Name: *Ed Carey*
Title: *Asst Secretary*