

JUL-13-2006

13:08

P. 1

LOG000069781

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H06000179319 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : SHUMAKER, LOOP & KENDRICK LLP
Account Number : 075500004387
Phone : (813) 229-7600
Fax Number : (813) 229-1660

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06 JUL 13 AM 8:40

FILED

FLORIDA/FOREIGN LIMITED LIABILITY CO

RADIANCE MEDSPA BOYNTON-DELRAY, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

RECEIVED

06 JUL 13 PM 2:13

DIVISION OF CORPORATION

1-14
allst

Electronic Filing Menu

Corporate Filing Menu

Help

H06000179319 3

**ARTICLES OF ORGANIZATION
RADIANCE MEDSPA BOYNTON-DELRAY, LLC**

ARTICLE I – Name:

The name of the Limited Liability Company is Radiance Medspa Boynton-Delray, LLC.

ARTICLE II – Address:

The street and mailing address of the principal office of the Limited Liability Company is:

328 N. Congress Avenue
Boynton Beach, FL 33426

IN WITNESS WHEREOF, I have signed these Articles of Organization as an authorized representative of a member and acknowledged them to be my act this 13th day of July, 2006.



Signature of 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.)

Erin Smith Aebel, Esq.

Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06 JUL 13 AM 8:40

FILED

H06000179319 3

H06000179319 3

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

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

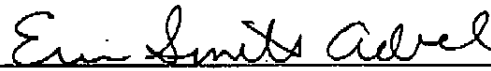
1. The name of the limited liability company is **RADIANCE MEDSPA BOYNTON-DELRAY, LLC.**

2. The name and the Florida street address of the registered agent are:

Erin Smith Aebel, Esq.
Shumaker, Loop & Kendrick, LLP
101 East Kennedy Blvd.
Suite 2800
Tampa, Florida 33602

FILED
06 JUL 13 AM 8:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.



Signature

H06000179319 3