# LU6000079429

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



RECEIVED

06 AUG 11 AM 9: 20 SECRE TARY OF STATE O



٢

ACCOUNT NO. : 07210000032	
REFERENCE : 306258 107982A	ALCR. MG
AUTHORIZATION : Spullleman	The second second
COST LIMIT : 4 155.00	Stor S.
ORDER DATE : August 11, 2006	LORIE CO
ORDER TIME : 12:50 PM	P
ORDER NO. : 306258-005	
CUSTOMER NO: 107982A	
DOMESTIC FILING	
NAME: SAPPHIRE GROUP, LLC	·
EFFECTIVE DATE:	• • • • • •
ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION	· ·····
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	
XX CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING	·
CONTACT PERSON: Carina L. Dunlap - EXT. 2951	· · · · · · · · · · · · · · · · · · ·

٩.

EXAMINER'S INITIALS:

Cug 11 06 11:55a

Paw Spa

7410024

P-I

# ARTICLES OF ORGANIZATION

of

### SAPPHIRE GROUP, LLC

ACORE THAT I HAD

### ARTICLE I NAME

The name of the limited liability company shall be Sapphire Group, LLC.

### ARTICLE II ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company shall be 3018 Alcazar Place, #104, Palm Beach Gardens, FL 33410.

# ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S SIGNATURE

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

CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, Florida 32301

Having been named as registered agent to accept service of process for the above stated limited partnership 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.

Corporation Service Company By:

Registered Agent's Signature Print Name and Title:\_\_\_\_\_

Carina L. Dunlap Asst. Vice President , I

. . . .

### ARTICLE IV DURATION

The period of duration for the Limited Liability Company shall be perpetual.

## ARTICLE V MANAGEMENT

The Limited Liability Company is to be managed by one or more managers and is therefore, a Manager-managed company. The names and addresses of the Managers are as follows:

> Matthew McCord 3018 Alcazar Place, #104 Palm Beach Gardens, FL 33410

Tracy McCord 3018 Alcazar Place, #104 Palm Beach Gardens, FL 33410

In accordance with Section 608.408(3), Florida Statutes, the execution of this document constitutes an affinnation under the penalties of perjury that the facts stated herein are true.

DATED: 8-11-2006

Matthew B. Malecol Matthew McCord, Manager

tracy mecond

IcCord. Manager