

LDL0000088379

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

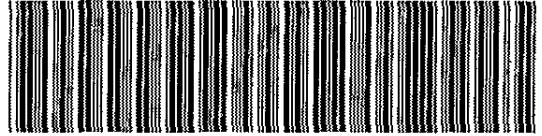
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ALISON LEFFEW
ATTORNEY AT LAW

VERO BEACH
80 ROYAL PALM POINTE #202, 32960
772-770-6110 FAX-772-562-7997

FORT PIERCE
144 NORTH DEPOT DR., 34950
772-466-6678 FAX-772-466-6679

TO: Registration Section
Division of Corporations

SUBJECT:

The enclosed Articles of Organization and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Alison Leffew, Attorney at Law
80 Royal Palm Pointe, #202
Vero Beach, FL 32960

For further information concerning this matter, please call:

772-466-6678

Enclosed is a check for the following amount: \$125.00

Street Address:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

**ARTICLES OF ORGANIZATION
OF
BELLA CORPO SPA & SALON, LLC**

ARTICLE I - NAME

The name of the limited liability company is **BELLA CORPO SPA & SALON, LLC**

ARTICLE II - ADDRESS

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

Principal Office Address:

Bella Corpo Day Spa, LLC
3223 Suite A
South US 1
Fort Pierce, FL 34982

Mailing Address:

Bella Corpo Day Spa, LLC
3223 Suite A
South US 1
Fort Pierce, FL 34982

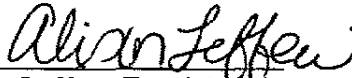
**ARTICLE III - REGISTERED AGENT,
REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE**

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

*Alison Leffew, Esquire
80 Royal Palm Pointe, #202
Vero Beach, FL 32960*

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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..


Alison Leffew, Esquire

ARTICLE IV – MEMBER MANAGERS

The name and address of each Manager:

Title:
Member Managers:

Name and Address:

Leticia Gamboa
703 Azalea Ave.
Fort Pierce, Florida 34982

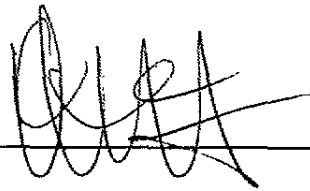
Ana Maria Adkison
807 El Rancho Drive
Fort Pierce, Florida 34982

ARTICLE V - EFFECTIVE DATE

The effective date of the company shall be the date of filing.

ARTICLE VI - OTHER MATTERS

REQUIRED SIGNATURE:

A handwritten signature in black ink, consisting of several loops and a long horizontal stroke, positioned above a solid horizontal line.

(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.)

Ana Maria Adkison

Typed or printed name of signee

A handwritten signature in black ink, appearing to read 'Leticia Gamboa', positioned above a solid horizontal line.

(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.)

Leticia Gamboa

Typed or printed name of signee