Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : {85

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From:

Account Name : A 1 A CORPORATE SERVICES, INC.

Account Number : I20010000247 Phone : (800)494-3124

Fax Number : (305) 675-2811

FLORIDA/FOREIGN LIMITED LIABILITY CO.

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SPORTS MASSAGE BY CASSIE LLC

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ARTICLES OF ORGANIZATION FOR A PLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 60B,F.S.

ARTICLE I: NAME

The name of the Limited Liability Company Is:

SPORTS MASSAGE BY CASSIE LLC

ARTICLE II: Address

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

1731 N OREGON CIR

TAMPA, FL 33612

ARTICLE III: REGISTERED AGENT. REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

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

CASSIE KUNKLE

1731 N OREGON CIR

TAMPA, FL 33612

Having been named as registered agent to accept service of process for the above stated limited liability company at the place designated in this $^{\infty}$ 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 ω agent as provided for in Chapter 608, F.S.

CASSIE KUNKLE / Registered Agent's Signature

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ARTICLE IV: MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

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ARTICLE V: MEMBERS (optional)

Managing Member:

CASSIE KUNKLE 1731 N OREGON CIR

TAMPA, FL 33612

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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.)

CASSIE KUNKLE

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