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

From: Account Name : A 1 A CORPORATE SERVICES, INC.  
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**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**BODY ARCHITECT, LLC**

Certificate of Status	0
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Electronic Filing Menu

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Help

H07000159146 3

**ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY**

In compliance with Chapter 608, F.S.

**ARTICLE I NAME**

The name of the Limited Liability Company is:

BODY ARCHITECT, LLC

**ARTICLE II ADDRESS**

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

136 SHOREBIRD DR #721

SANTA ROSA BEACH, FLORIDA 32459

**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE**

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

LANDON L. COOPER

136 SHOREBIRD DR #721

SANTA ROSA BEACH, FLORIDA 32459

Having been named as registered agent 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..

X 

LANDON L COOPER / Registered Agent's Signature

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H07000159146 3

H07000159146 3

PAGE 2 BODY ARCHITECT, LLC

**ARTICLE IV MANAGEMENT**

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

**ARTICLE V MEMBERS (optional)**

MANAGING MEMBER:

LANDON L. COOPER

136 SHOREBIRD DR #721

SANTA ROSA BEACH, FLORIDA 32459

\*\*\*\*\*

X 

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.

LANDON L. COOPER

Typed or printed name of signer

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