

**08000007531**

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**Honest Expressions, LLC**

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**ARTICLES OF ORGANIZATION  
OF  
Honest Expressions, LLC**

**ARTICLE I NAME**

The name of the limited liability company shall be: **Honest Expressions, LLC**

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business and mailing address of this Limited Liability Company shall be: 2081 N.E. 56th Street, Unit 205, Fort Lauderdale, Florida 33308.

**ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS**

The name and address of the initial registered agent is: Business Filings Incorporated, 1203 Governors Square Blvd, Suite 101, Tallahassee, Florida 32301-2960. Located in the County of Leon.

**ARTICLE IV DURATION**

The duration for the limited liability company shall be: 12/31/2048.

**ARTICLE V MANAGERS/MEMBERS**

The management of the limited liability company is reserved for the Members and the name and address of the member of the Limited Liability Company is:

Barbara Morin, 2081 N.E. 56th Street, Unit 205, Fort Lauderdale, Florida 33308



Date: January 18, 2008

Business Filings Incorporated, Organizer

Mark Williams, A.V.P.

Authorized Representative

Prepared by Mark Williams, Business Filings Incorporated, 8040 Excelsior Dr., Suite 200, Madison, WI 53717

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FAX AUDIT # **H08000015130 3**CERTIFICATE OF DESIGNATION OF REGISTERED  
AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE  
UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF  
FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE  
REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: **Honest Expressions, LLC**

The name and address of the registered agent and office is Business Filings Incorporated, 1203  
Governors Square Blvd, Suite 101, Tallahassee, Florida 32301-2960. Located in the County of  
Leon.

Having been named as registered agent and to accept service of process for the above stated  
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:   
*Mark Williams, A.V.P. Business Filings Incorporated*

Date: *January 18, 2008*FILED  
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