

L08000021646

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

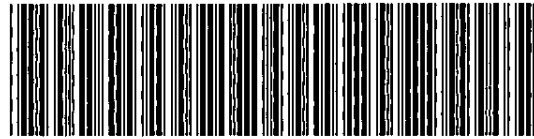
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800117231478

RECEIVED
08 FEB 29 AM 9:18
DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
08 FEB 29 PM 12:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. KOHR

FEB 29 2008

EXAMINER

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662, TALLAHASSEE, FL 32302
155 OFFICE PLAZA DRIVE, SUITE A, TALLAHASSEE, FL 32301
PHONE: (850) 216-0457 / FAX: (850) 216-0460

FILED
08 FEB 29 PM 12:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DATE: 2/29/2008

NAME: NAIL ART AND COMPANY, LLC

TYPE OF FILING: ARTICLES OF ORGANZIATION

COST: \$125

RETURN:

ACCOUNT: FCA000000015

AUTHORIZATION: PAUL / ABBIE HODGE



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

NAIL ART AND COMPANY LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

2426 Santa Barbara Blvd.
Cape Coral, FL 33914

Mailing Address:

2426 Santa Barbara Blvd.
Cape Coral, FL 33914

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Dat Nguyen

Name

2426 Santa Barbara Blvd.

Florida street address (P.O. Box **NOT** acceptable)

Cape Coral, FL 33914

City, State, and Zip

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..


Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

FILED
FEB 29 PM 12:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

Dat Nguyen

2426 Santa Barbara Blvd.

Cape Coral, FL 33914

MGRM

Tai T. Nguyen

2426 Santa Barbara Blvd.

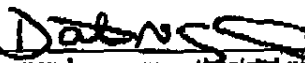
Cape Coral, FL 33914

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:



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.)

Dat Nguyen

Typed or printed name of signee