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(Address)

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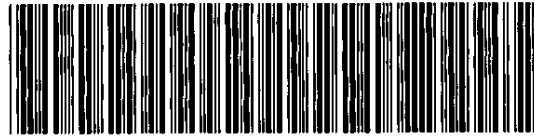
(Business Entity Name)

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B. KOHR

APR - 3 2008

EXAMINER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Sally's Place, LLC  
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Blake Hayward

(Name of Person)

Hayward & Grant, P.A.

(Firm/Company)

2121 Killarney Way, Suite G

(Address)

Tallahassee, FL 32309

(City/State and Zip Code)

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For further information concerning this matter, please call:

Blake Hayward at ( 850 ) 386-4400  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee    ☐ \$130.00 Filing Fee & Certificate of Status    ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)    ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

**Mailing Address**

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

**Street/Courier Address**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**Articles of Organization For**  
**Sally's Place, LLC,**  
**a Florida Limited Liability Company**

**Article I - Name**

The name of the Limited Liability Company is Sally's Place, LLC.

**Article II - Principal Office**

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

131 P. A. Sanders Road  
Sopchoppy, Florida 32358

**Article III - Registered Agent, Registered Office, & Registered Agent's Signature**

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

Blake Hayward  
Hayward & Grant, P.A.  
2121-G Killarney Way  
Tallahassee, Florida 32309


*Having been named as registered agent and to accept service of process for the above stated corporation 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, Florida Statutes.*

  
\_\_\_\_\_  
Blake Hayward, Registered Agent

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**Article IV - Management**

The Limited Liability Company is to be managed by the members.

  
\_\_\_\_\_  
Anthony E. Atkins

(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.)