

Division of Corporations

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Florida Department of State
Division of Corporations
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FLORIDA/FOREIGN LIMITED LIABILITY CO.

Pro Spa, LLC

Certificate of Status	1
Certified Copy	1
Page Count	03
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D. BRUCE

MAY 07 2008

EXAMINER

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**ARTICLES OF ORGANIZATION
OF PRO SPA, LLC**

**ARTICLE I
NAME**

The name of this Limited Liability Company is PRO SPA, LLC (the "Company").

**ARTICLE II
DURATION**

The period of duration for the Company is perpetual.

**ARTICLE III
ADDRESS**

The mailing address and street address of the principal office of the Company

1165 8th Street South
Naples, Florida 34102

**ARTICLE IV
REGISTERED OFFICE AND AGENT**

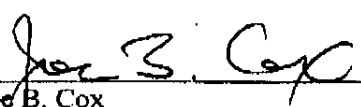
The address of the initial registered office of this Company shall be 1185 Immokalee Road, Suite 110, Naples, Florida 34110, and its initial registered agent at such office shall be Joe B. Cox, Esq.

**ARTICLE V
MANAGEMENT**

The Company is to be a Manager-Managed company and the name and address of the elected Manager is:

Paul Schryver
1165 8th Street South
Naples, Florida 34102

Dated effective as of May 6th, 2008.



Joe B. Cox
Authorized Representative

EFFECTIVE DATE 5-6-08

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

1. The name of the Company is PRO SPA, LLC.
2. The name and address of the registered agent and office is:

Joc B. Cox, Esq.
1185 Immokalee Road, Suite 110
Naples, Florida 34110

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.

Dated effective as of 5/6, 2008.

By: Joc B. Cox
Initial Registered Agent

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