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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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# JAMES E. COOMBS ATTORNEY AT LAW

336 HINSDALE DRIVE DE BARY, FLORIDA 32713

Admitted to practice in FLORIDA & NEW YORK

TELEPHONE 386/753-0946 FACSIMILE 386/753-0337

June 18, 2008

Secretary of State Registration Section Division of Corporations P. O. Box 6327 Tallahassee, Florida 32314

RE: Shear Magic Beauty Salon, LLC

Dear Sir or Madam:

Enclosed please find Articles of Organization, Designation of Registered Agent and a check for one hundred sixty (\$160.00) dollars. The Articles and Designation are submitted for filing and I respectfully request that I be supplied with a certified copy of the Articles and Designation, as well as a Certificate of Status for Shear Magic Beauty Salon, LLC.

Please return all correspondence and documents concerning this matter to:

James E. Coombs, Esq. 336 Hinsdale Drive DeBary, Florida 32713

Please feel free to call me for further information about this matter, as you may deem necessary.

I enclose the following:

- 1. Articles of Organization and Designation of Registered Agent for Shear Magic Beauty Salon, LLC dated June 17, 2008; and,
- 2. Check to Florida Department of for one hundred sixty (\$160.00) dollars.

Very Truly Yours

James E. Coombs

Enclosures (2)

## **ARTICLES OF ORGANIZATION**

#### FOR A FLORIDA LIMITED LIABILITY COMPANY

#### NAMED AND TO BE KNOWN AS

## SHEAR MAGIC BEAUTY SALON, LLC

**ARTICLE I: Name** 

The name of the Limited Liability Company is:

Shear Magic Beauty Salon, LLC

**ARTICLE II: Address** 

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

Shear Magic Beauty Salon, LLC

3204 S Highway 17-92

DeBary, Florida 32713

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

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

Susan Martino

c/o Shear Magic Beauty Salon, LLC

3204 S Highway 17-92

DeBary, Florida 32713

Having been named as registered agent and to accept service of process for the above named Limited Liability Company in the place indicated in this certificate, I hereby accept the appointment as registered agent and agree to act in that 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.

Susan Martino, Registered Agent

2000 JUN 20 PM 4: 28
SECRETARY OF STATE

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# ARTICLE IV: Manager or Managing Member

The name and address of the Managing Member is:

**MGRM** 

Susan Martino

c/o Shear Magic Beauty Salon, LLC

3204 S Highway 17-92

DeBary, Florida 32713

#### **ARTICLE V: Effective Date**

The effective date of these Articles of Organization prepared, executed and filed on behalf of **Shear Magic Beauty Salon**, **LLC** shall be the date of filing in the offices of the Secretary of State of the State of Florida.

Susan Martino, the sole Member of

Shear Magic Beauty Salon, LLC

(In accordance with the provisions of section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that each and all of the facts stated herein are true.)

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