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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : KOCH & COMPANY, CPAS, P.A.
Account Number : I199900000002
Phone : (941) 637-0544
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FLORIDA/FOREIGN LIMITED LIABILITY CO.

DEVOS AESTHETICS, LLC

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(((H08000218921 3)))

ARTICLES OF ORGANIZATION

OF

DEVOS AESTHETICS, LLC

ARTICLE 1 - NAME

The name of the Limited Liability Company is **DEVOS AESTHETICS, LLC**
(hereinafter, "Limited Liability Company").

ARTICLE 2 - ADDRESS

The street address of the principal office of this Limited Liability Company shall be:
13801-B South Tamiami Trail, North Port, FL 34287

ARTICLE 3 - REGISTERED OFFICE AND REGISTERED AGENT

The name and street address of the registered agent of this Limited Liability Company is:

Alan J. Devos, 13801-B South Tamiami Trail, North Port, FL 34287

**ACCEPTANCE OF REGISTERED AGENT DESIGNATED
IN ARTICLES OF ORGANIZATION**

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.

By: _____

Alan J. Devos, Registered Agent

By: _____

Alan J. Devos, Organizing Member

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