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**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**Caribbean Sisters Holistic Energy Day Spa, LLC**

Certificate of Status	0
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Page Count	03
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**EXAMINER**

FAX AUDIT # **H08000254664 3**

**ARTICLES OF ORGANIZATION  
OF  
Caribbean Sisters Holistic Energy Day Spa, LLC**

**ARTICLE I            NAME**

The name of the limited liability company shall be: **Caribbean Sisters Holistic Energy Day Spa, LLC**

**ARTICLE II           PRINCIPAL OFFICE**

The principal place of business and mailing address of this Limited Liability Company shall be: 121 W. Plymouth Ave., Deland, Florida 32720.

**ARTICLE III        INITIAL REGISTERED AGENT & STREET ADDRESS**

The name and address of the initial registered agent is: Business Filings Incorporated, 1203 Governors Square Blvd, Suite 101, Tallahassee, Florida 32301-2960. Located in the County of Leon.

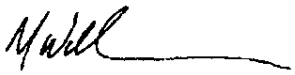
**ARTICLE IV        DURATION**

The duration for the limited liability company shall be: 40 years.

**ARTICLE V        MANAGERS/MEMBERS**

The management of the limited liability company is reserved for the Members and the names and addresses of the members of the Limited Liability Company are:

Jenine Bryan, 121 W. Plymouth Ave., Deland, Florida 32720  
Binta Oliver, 121 W. Plymouth Ave., Deland, Florida 32720

  
\_\_\_\_\_  
Business Filings Incorporated, Organizer  
Mark Williams, A.V.P.  
Authorized Representative

Date: November 12, 2008

Prepared by Mark Williams, Business Filings Incorporated, 8040 Excelsior Dr., Suite 200, Madison, WI 53717  
(608) 827-5300

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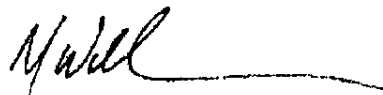
CERTIFICATE OF DESIGNATION OF REGISTERED  
AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE  
UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF  
FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE  
REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: **Caribbean Sisters Holistic Energy Day Spa, LLC**

The name and address of the registered agent and office is Business Filings Incorporated, 1203  
Governors Square Blvd, Suite 101, Tallahassee, Florida 32301-2960. Located in the County of  
Leon.

Having been named as registered agent and to accept service of process for the above stated  
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.



Signature: \_\_\_\_\_  
*Mark Williams, A.V.P. Business Filings Incorporated*

Date: *November 12, 2008*

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