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D. BRUCE

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EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJE	ECT: Massage 2 So, LLC. (Name of Limited Liability Company)	
The end	closed Articles of Organization and fee(s) are submitted for filing.	
Please r	return all correspondence concerning this matter to the following:	
-	Carol A. Vogel	
	(· · · · · · · · · · · · · · · · · · ·	
-	(Firm/Company)	_
	14259 Gratcatcher Fer. Es.	5
-	(Address)	5- -
	Bradenton, FL. 34202	;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;
-	(City/State and Zip Code)	
For furt	ther information concerning this matter, please call: Wol A. Jogel at (941) 224-2493 (Name of Person) (Area Code & Daytime Telephone Number)	
Enclose	sed is a check for the following amount:	
(\$125.0	00 Filing Fee \$\bigcup \\$130.00 Filing Fee & \bigcup \\$155.00 Filing Fee & \bigcup \\$160.00 Filing Fee, Certificate of Status (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle	

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

(Must end with the words "Limited Liability	Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the print	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
Carol A. Vogel 14259 Gnatcatcher Ter. Bradenton, FL. 34202	Carol A. Vogel 14259 Gnatcatcher Fer. Bradenton, FL 34202
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	red Agent. You must designate an individual or another
The name and the Florida street address of the re-	
Name 14259 Gnatcato	her Tex: Ses (P.O. Box NOT acceptable) FOR PROPERTY OF SIGNATION OF
Florida street address Bradenton. City, State, an	FL 34202
liability company at the place designated in the registered agent and agree to act in this capacity.	scept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of al formance of my duties, and I am familiar with and

(CONTINUED)
Page 1 of 2

accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

<u>Fitle:</u> 'MGR" = Manager 'MGRM" = Managing	Name and Address: Member
MERM	Carol A. Vogel 14259 Gnatication Ter. Bradenton, FL 34202
LE V: Effective date, is ective date, the	other than the date of filing: (OPTION e date must be specific and cannot be more than five business da
EV: Effective date, in ective date is listed, the lays after the date of	other than the date of filing: (OPTION date must be specific and cannot be more than five business dating.)
EV: Effective date, in ective date is listed, the lays after the date of	other than the date of filing: (OPTION date must be specific and cannot be more than five business dating.)
Tective date is listed, the days after the date of REQUIRED SIGNAT	other than the date of filing: (OPTION date must be specific and cannot be more than five business daling.) URE:
LE V: Effective date, in ective date is listed, the days after the date of REQUIRED SIGNATE. Signate of this error of this erro	other than the date of filing: (OPTION date must be specific and cannot be more than five business daling.) URE:

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)