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(Requestor's Name)		
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PICK-UP WAIT M	AIL	
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Special Instructions to Filing Officer:		
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Office Use Only



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T. HAMPTON

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EXAMINER

# **COVER LETTER**

	ion Section  of Corporations	
SUBJECT:	LINDA GRAHAM'S HAIR STUDIO, LLC	
	Name of Limited Liability Company	
The enclosed Arti	les of Organization and fee(s) are submitted for filing.	
Please return all c	rrespondence concerning this matter to the following:	
	Charles S. Dayhoff III, Esquire	_
	Name of Person	
	3830 Tampa Road, Suite 150	
	Firm/Company	
	3830 Tampa Road, Suite 150	
	Address	
	Palm Harbor, FL 34684	
	City/State and Zip Code	
	E-mail address: (to be used for future annual report notification)	
For further inform	tion concerning this matter, please call:	
	S. Dayhoff III at (727) 785-6721  Iame of Person Area Code & Daytime Telephone Number	
Enclosed is a che	ck for the following amount:	
정\$125.00 Filing	Certificate of Status  Certificate of Status  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)	tus &
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301	

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### **ARTICLE I - Name:**

The name of the Limited Liability Company is:

LINDA GRAHAM'S HAIR STUDIO, LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

#### **ARTICLE II - Address:**

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

#### **Principal Office Address:**

#### Mailing Address:

1003 Indiana Avenue

34683 Palm Harbor,

855 Pinewood Terrace West

Palm Harbor, FL 34683

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Charles S. Dayhoff III Name

3830 Tampa Road, Suite 150

Florida street address (P.O. Box NOT acceptable)

Palm Harbor, FL FL 34684

City, State, and Zip

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 as provided for in Chapter 608, F.S..

(CONTINUED)

## Page 1 of 2

## ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

"MGR" = Manager	Name and Address:
"MGRM" = Managing Memb	ber
•	
MGRM	Linda Graham
	855 Pinewood Terrace West Palm Harbor, FL 34683
	Paim naibol, FL 34003
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(Use attachment if necessary)	
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of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)