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FLORIDA/FOREIGN LIMITED LIABILITY CO.

Institute of Look Good & Feel Good LLC

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EXAMINER

FAX AUDIT # 4090002050143

**ARTICLES OF ORGANIZATION  
OF  
Institute of Look Good & Feel Good LLC**

**ARTICLE I NAME**

The name of the limited liability company shall be: Institute of Look Good & Feel Good LLC

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business and mailing address of this Limited Liability Company shall be:  
3387 - 3395 Eastbay Drive, Largo, Florida 33771.

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

The name and address of the initial registered agent is: Smruti Abhyankar, 3387-3395 Eastbay Drive, Largo, Florida 33771. Located in the County of Pinellas.

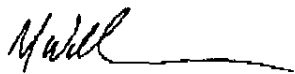
**ARTICLE IV DURATION**

The duration for the limited liability company shall be: Perpetual.

**ARTICLE V MANAGERS/MEMBERS**

The management of the limited liability company is reserved for the Members and the name and address of the member of the Limited Liability Company is:

Smruti Abhyankar, 3387 - 3395 Eastbay Drive, Largo, Florida 33771

  
Business Filings Incorporated, Organizer  
Mark Williams, A.V.P.  
Authorized Representative  
Prepared by Mark Williams, Business Filings Incorporated, 8040 Excelsior Dr., Suite 200, Madison  
WI 53717  
(608) 827-5300

Date: September 15, 2009

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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: Institute of Look Good & Feel Good LLC

The name and address of the registered agent and office is Smruti Abhyankar, 3387-3395 Eastbay  
Drive, Largo, Florida 33771. Located in the County of Pinellas.

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:

Smruti Abhyankar  
Smruti Abhyankar

09.17.09.  
Date:

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