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**EXAMINER** 

ON SCORE OF CORRORS IN 10:51

October 1, 2009

### Florida Department of State Division of Corporations

P.O. Box 6327
Tallahassee, Florida 32314

Re: DIVINE IMAGE BEAUTY SALON, LLC

#### Gentlemen:

Enclosed find an original and copy of Articles of Organization of Divine Image Beauty Salon, LLC, together with a self-addressed and stamped envelope for your convenience in returning the duplicate copy.

Also enclosed is check in the amount of \$7900 to cover filing fee.

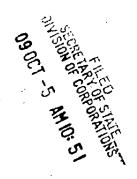
Very truly yours,

Lorraine C. Kaster, Paralegal

S.O.S. Secretarial Service, Inc. 360 Wilshire Blvd. Ste. 105 Casselberry, Florida 32707 (407) 339-3411

# ARTICLES OF ORGANIZATION of

## DIVINE IMAGE BEAUTY SALON, LLC



#### ARTICLE I - Name

The name of the Limited Liability Company is: DIVINE IMAGE BEAUTY SALON, LLC

#### **ARTICLE II - Duration**

The street address of the Limited Liability Company is:

463 Green Springs Circle
Winter Springs, Florida, 32708 – (County of Seminole)

The mailing address of the Limited Liability Company is:

463 Green Springs Circle Winter Springs, Florida 32708

#### **ARTICLE III - Purpose**

This Limited Liability Company is organized for the purpose of transacting any and all lawful business, including, but not limited to the following: Hairdressing, beauty salon and all related activities.

#### ARTICLE IV

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

MILDRED RIVERA 463 Green Springs Circle Winter Springs, Florida 32708

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.

Registered Agent Signature:

Mildred Rivera

#### **ARTICLE V**

# **ARTICLE VI - Initial Registered Office and Agent**

The street address of the initial registered office of this corporation is 463 Green Springs Circle, Winter Springs, Florida and registered agent is **MILDRED RIVERA** whose signature at the end hereof, accepts such designation.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Incorporation the day of October, 2009
Mudred Divera
MILDRED/RIVERA
STATE OF FLORIDA )
COUNTY OF SEMINOLE ) ss.
On October 1, 2009 before me, Lorraine C. Kaster, a Notary Public of Florida appeared MILDRED RIVERA, personally known to be (or provided to me on the basis of satisfactory evidence) to be the person who executed the foregoing Articles of Organization of said Limited Liability Company as her authorized capacity, and that by her signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument.
WITNESS my hand and official seal.  AffiantknownProduced ID
Signature: Type of ID
Lorraine C. Kaster  Lorraine C. Kaster  Lorraine C. Kaster  EXPIRES: May 13, 2013  Bonded Thru Budget Notary Services
CERTIFICATE OF ACCEPTANCE OF REGISTERED AGENT
MILDRED RIVERA, having been named as Registered Agent to accept service of process for the above stated Limited Liability Company, at the place designated in this certificate, I hereby agree to act in this capacity and are to comply with the provisions of Florida Statutes.
Dated this/S/ day of October, 2009
10 ledred Divera

MILDRED RIVERA (Registered Agent)

STATE OF FLORIDA )	
COUNTY OF SEMINOLE ) ss	
MILDRED RIVERA, personally known to be (or evidence) to be the person who executed the foregrapacity, and that by her signature on the instrument which the person acted, executed the instrument.  WITNESS my hand and official seal.	going Articles of Organization as her authorized ment the person, or the entity upon behalf of
LOFRAINE C. KASTER MY COMMISSION # DD 853327 EXPIRES: May 13, 2013 Bonded Thru Budget Notary Services	