

Division of Corporations

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**LO9000110055**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: RBRUNETTI@tafinancialgroup.com

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Robyn Marx Salon, LLC

|                       |          |
|-----------------------|----------|
| Certificate of Status | 1        |
| Certified Copy        | 0        |
| Page Count            | 0203     |
| Estimated Charge      | \$130.00 |

D. BRUCE

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EXAMINER



November 16, 2009

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

HUBCO

SUBJECT: ROBYN MARXX SALON, LLC  
REF: W09000050321

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

Please list the complete principal office address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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Deborah Bruce  
Regulatory Specialist II

FAX Aud. #: H09000241246  
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P.O BOX 6327 -- Tallahassee, Florida 32314

H09000241246

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

**ARTICLE I - Name**

The name of the Limited Liability Company is: **Robyn Marxx Salon, 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:**

154 East Boston Post Road

154 East Boston Post Road

Mamaroneck, NY 10543

Mamaroneck, NY 10543

**ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature**

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

**Mark Brunetti**

Name

**13008 Aubrey Lane**

(P.O. Box or Mail Drop Box **NOT** Acceptable)

**Winter Garden, FL 34787**

(City / State / Zip)

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*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.*

*Mark A. Brunetti*

**Registered Agent's Signature - Mark Brunetti**

**ARTICLE IV - Manager(s) or Managing Member(s)**

H09000241246

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

**Title:**

**Name and Address:**

"MGR" = Manager

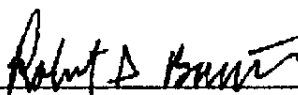
"MGRM" = Managing Member

MGRM

Robert G. Brunetti - 154 East Boston Post Road, Mamaroneck, NY 10543

(Use attachment if necessary)

**REQUIRED SIGNATURE:**



\_\_\_\_\_  
Signature of a member or authorized representative of a member.

( In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. )

**Robert G. Brunetti**

\_\_\_\_\_  
Typed or printed name of signee

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