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To:

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Fax Number : (850) 617-6383

From:

Account Name : PATRICK M. WHITEHEAD, P.A.
Account Number : I200900000003
Phone : (561) 833-4427
Fax Number : (561) 282-9400

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FLORIDA/FOREIGN LIMITED LIABILITY CO.

The Style Bar, LLC

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EXAMINER

ARTICLES OF ORGANIZATION
OF
THE STYLE BAR, LLC
A Florida Limited Liability Company

The undersigned hereby acknowledges these Articles of Organization for the purpose of forming a Limited Liability Company under the Florida Limited Liability Company Act, Chapter 608, Laws of Florida.

ARTICLE I
Name

The name of the Limited Liability Company is THE STYLE BAR, LLC.

ARTICLE II
Address

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

119 Datura Street
West Palm Beach, Florida 33401

ARTICLE III
Registered Agent and Registered Office

The name and the Florida street address of the Registered Agent are:

PATRICK M. WHITEHEAD, ESQ.
215 S. Olive Avenue, Suite 400
West Palm Beach, Florida 33401

ARTICLE IV
Management

The Limited Liability Company is to be managed by a Managing Member and is, therefore, a manager-managed company.

ARTICLE V
Commencement

The Limited Liability Company shall commence its existence upon filing with the Secretary of State of the State of Florida.

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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.

Date: 11-18-09


GERARDO NOVOA, Member

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**CERTIFICATE DESIGNATING PLACE OF
BUSINESS OR DOMICILE FOR THE SERVICE
OF PROCESS WITHIN THIS STATE, NAMING
AGENT UPON WHOM PROCESS MAY BE SERVED**

Pursuant to the provisions of Section 608.415 or 608.507, Florida Statutes, the undersigned Limited Liability Company submits the following statement to designate a Registered Office and Registered Agent in the State of Florida:

That THE STYLE BAR, LLC, desiring to organize under the laws of the State of Florida, has named PATRICK M. WHITEHEAD, ESQ., located at the Registered Office of the Limited Liability Company at 215 S. Olive Avenue, Suite 400, West Palm Beach, Florida 33401, as its Registered Agent to accept service of process within this state.

ACKNOWLEDGMENT:

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.


PATRICK M. WHITEHEAD, ESQ.
Registered Agent

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