

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Flagler School of Dance, LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Cindy Lee Miller
Name of Person

Firm/Company

6 Richland Place
Address

Palm Coast, FL 32164
City/State and Zip Code

dancecorner@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cindy Miller at (386) 437-2067
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION
OF
FLAGLER SCHOOL OF DANCE, LLC

ARTICLE I - NAME

The name of the limited liability company is Flagler School of Dance,
("company").

ARTICLE II - ADDRESS

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

Principal Office Address:

6 Richland Place
Palm Coast, Florida 32164

Mailing Address:

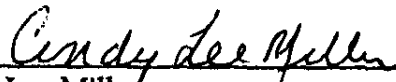
6 Richland Place
Palm Coast, Florida 32164

ARTICLE III - REGISTERED AGENT,
REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

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

Cindy Lee Miller
6 Richland Place
Palm Coast, Florida 32164

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..


Cindy Lee Miller

FILED
10 APR 19 PM 3:19
CLERK OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV - MANAGERS OR MANAGING MEMBERS

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

Title:

"MGR" = Manager

"MGMR" = Managing
Member

Name and Address:

MGMR

Cindy Lee Miller
6 Richland Place
Palm Coast, Florida 32164

FILED
10 APR 19 PM 3: 19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REQUIRED SIGNATURE:

Cindy Lee Miller

Signature of a member or an authorized representative of a member.

(In accordance with section 608.406(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Cindy Lee Miller

Typed or printed name of signee