

Division of Corporations

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Florida Department of State
Division of Corporations
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FLORIDA LIMITED LIABILITY CO.
Nail Fever By Vo & Le LLC

Certificate of Status	1
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A. LUNT

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EXAMINER

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ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: **Nail Fever By Vo & Le LLC**

ARTICLE II - Address

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

Principal Office Address:8888 SW 136 Street, Suite 356Miami, FL 33176Mailing Address:8888 SW 136 Street, Suite 356Miami, FL 33176

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

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

Van-VoName7785 SW 120 Street(P.O. Box or Mail Drop Box NOT Acceptable)Miami, FL 33156(City / State / Zip)

I 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.


Registered Agent's Signature - Van-Vo

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

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

Title:

Name and Address:

"MGR" = Manager

"MGRM" = Managing Member

MGRM

Van Vo - 7785 SW 120 Street, Miami, FL 33156

MGRM

Dan - Le - 7785 SW 120 Street, Miami, FL 33156

(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.)

Van Vo

Typed or printed name of signer

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