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(Requestor's Name)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Consisting the Cities Office				
Special Instructions to Filing Officer:				
A. LUNT				
JUN 30 2010				
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COVER LETTER

то:	Registration Section Division of Corporations		
SUBJI	_{CT:} Roye Salons, LLC		
	Name of Lim	ited Liability Company	
The en	closed Articles of Organization and fee(s) are	e submitted for filing.	
Please	return all correspondence concerning this ma	atter to the following:	d., 28
	LaDonna S. Roye		ZOII JUN 28 SECRETAR'S TALLAHASS
		Name of Person	N 2
	Roye Salons, LLC		RY OF
		Firm/Company	FLO
	2228 Imperial Golf Course	Boulevard	PAR K
		Address	
}	Naples, Florida 34110		
		ity/State and Zip Code	<u></u>
_	beautysalon@comcast.net		
	E-mail address: (to be used	for future annual report notification)	
For fur	ther information concerning this matter, please	se call:	
LaDo	onna S. Roye	at (239) 254-9100	
	Name of Person	Area Code & Daytime Telephone Nur	mber
Enclos	sed is a check for the following amount:		
\$125.00	Filing Fee \$\int\\$130.00 Filing Fee & Certificate of Status	Certified Copy Certifie (additional copy is enclosed) Certifie	O Filing Fee, cate of Status & ed Copy nal 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

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	SECTALL
Roye Salons, LLC	LAHAS
(Must end with the words "Limited Liabili	ry Company, "L.L.C., or "LLC.)
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liability Company
Principal Office Address:	Mailing Address:
2228 Imperial Golf Course Boulevard Naples, Florida 34110	2228 Imperial Golf Course Boulevard Naples, Florida 34110
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	
The name and the Florida street address of the re	egistered agent are:
LaDonna S. Roye	
Name	
2228 Imperial Go	If Course Blvd.

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..

City, State, and Zip

Florida street address (P.O. Box NOT acceptable)

FL 34110

(CONTINUED)

Page 1 of 2

Naples

<u>Title:</u> "MGR" = Manager "MGRM" = Managing N	Name and Address:	SECRETARY TALLAHASS
MGRM	LaDonna S. Roye	SSE
	2228 Imperial Golf Course Boulevard	<u> </u>
	Naples, Florida 34110	FLORI
 		
(Use attachment if neces	•	
LE V: Effective date, if fective date is listed, the days after the date of fi	er than the date of filing: te must be specific and cannot be more than five (.)	(OPTION/e business day
LE V: Effective date, if fective date is listed, the days after the date of fi	er than the date of filing: te must be specific and cannot be more than five (.)	e business da

Page 2 of 2

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)