

L110000097183

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900210812469

08/12/11--01005--029 \*\*125.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2011 AUG 23 PM 1:39

FILED

J. SAULSBERRY  
EXAMINER

AUG 24 2011

Alicia Marcum  
Ideal Image Consultants, LLC  
2178 Cavarly Boulevard  
Jacksonville, Florida 32246

August 19, 2011

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Subject: Ideal Image Consultants, LLC  
Ref Number: W11000042675

Dear Sir or Madam:

Please find enclosed the updated Articles of Organization for Ideal Image Consultants, LLC and a copy of your letter dated August 16, 2011.

If you have any questions concerning the filing of these documents, please call (904) 642-8987.

Truly Yours,

*Alicia Marcum*  
Alicia Marcum

FILED  
2011 AUG 23 PM 1:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

**ARTICLE I – NAME**

The name of the Limited Liability Company is: Ideal Image Consultants, LLC.

**ARTICLE II – ADDRESS**

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

**Principal Office Address:**

2178 Cavalry Boulevard  
Jacksonville, Florida 32246

**Mailing Address:**

2178 Cavalry Boulevard  
Jacksonville, Florida 32246

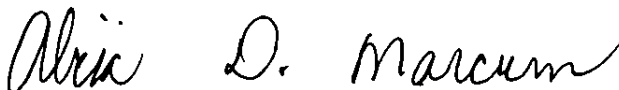
FILED  
2011 AUG 23 PM 1:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE III – REGISTERED AGENT, REGISTERD OFFICE & REGISTERED  
AGENT'S SIGNATURE**

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

Alicia D. Marcum  
2178 Cavalry Boulevard  
Jacksonville, Florida 32246

*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 herby accept the appointment as registered agent and agree to act in this capacity. I further agree to company with the provisions of all statues relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my positions as register agent as provided for in Chapter 608, F.S.*



Registered Agent's Signature

#### ARTICLE IV – MANGER OR MANAGING MEMBERS

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

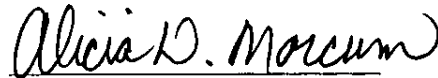
**Title:**

Member

**Name and Address:**

Alicia D. Marcum  
2178 Cavalry Boulevard  
Jacksonville, Florida 32246

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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



Alicia D. Marcum  
Member

FILED  
2011 AUG 23 PM 1:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA