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Division of Corporations

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From:

Account Name : CSH SERVICES, LLC

Account Number : I20070000160

Phone : (800)494-3124 Fax Number : (551)455-9885

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# FLORIDA LIMITED LIABILITY CO. GLOW PREMIER SALON & SPA LLC

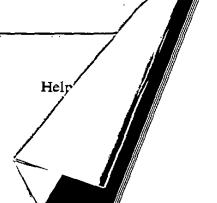
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Corporate Filing Menu

EXAMINER



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## ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608,F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:

GLOW PREMIER SALON & SPAILLC

ARTICLE II \_\_\_ADDRESS

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

1445 SW MAIN BOULEVARD, STE 135 LAKE CITY, FLORIDA 32025

## ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

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

EBONI T SAMPSON

22523 NW 227TH DRIVE

HIGH SPRINGS, FLORIDA 32643

Having been named as registered agent 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.

BONI T SAMPSON Registered Agent's signature

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H12000118874 3

## PAGE 2 GLOW PREMIER SALON & SPAILLC

### ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

#### ARTICLE V MEMBERS

MANAGING MEMBER
EBONI T SAMPSON
22523 NW 227TH DRIVE
HIGH SPRINGS, FLORIDA 32643

Signature of a member or an 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.

**EBONI T SAMPSON**