Florida Department of State

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To:

Division of Corporations

Fax Number

; (850)617-6383

From:

Account Name : GREENSPOON MARDER, P.A.

Account Number: 076064003722 Phone: (888)491-1120 Fax Number: (954)343-6962

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FLORIDA LIMITED LIABILITY CO. BG SALON AND NAILS LLC

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SCORE LAND OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION

OF

BG SALON AND NAILS LLC

ARTICLE I - Name:

The name of the Limited Liability Company is BG SALON AND NAILS LLC.

ARTICLE II - Duration:

The period of duration for the Limited Liability Company shall begin with the filling of these Articles with the Florida Department of State, and shall exist perpetually, unless sooner dissolved in accordance with the Operating Agreement of the Limited Liability Company or Florida law.

ARTICLE III - Address:

The mailing address and street address of the principal office of the Limited Liability Company is 141 N.W. 20 Street, Suite F2, Boca Raton, Florida 33431.

ARTICLE IV - Registered Agent:

The name and address of the initial registered agent for this Limited Liability Company is Reuben Schneider, 18851 N.E. 29 Avenue, Suite 901, Aventura, Florida 33180.

ARTICLE V - Management:

The Limited Liability Company is to be managed by a manager or managers. The name and address of the initial manager who is to serve as manager of the Company is:

Bobby Genovese 141 N.W. 20 Street, Suite F2, Boca Raton, Florida 33431

Whereof, the undersigned authorized representative of the member has executed these Articles the 13th day of March, 2013.

Reuben Schneider

Authorized Representative of Member

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION. 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

BG SALON AND NAILS LLC

2. The name and address of the registered agent and office is:

Reuben Schneider, Esq.

18851 N.E. 29 Avenue, Sulte 901, Aventura, FL 33180.

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.

Reuben Schneider (Signature) 3/13/13

Reuben Schneider (Signature) (Date)