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(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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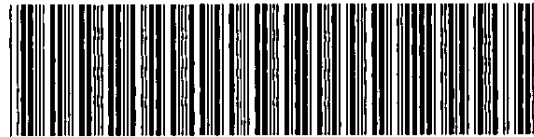
(Business Entity Name)

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STATE OF NEW YORK

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CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 017612 7839872

AUTHORIZATION :

COST LIMIT : \$ 155.00

ORDER DATE : February 18, 2014

ORDER TIME : 2:14 PM

ORDER NO. : 017612-005

CUSTOMER NO: 7839872

DOMESTIC FILING

NAME: HEAVENLY TOUCH MASSAGE OF PALM
BAY, LLC

EFFECTIVE DATE:

____ ARTICLES OF INCORPORATION
____ CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
____ PLAIN STAMPED COPY
____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - EXT. 52956

EXAMINER'S INITIALS: _____

14 FEB 19 2014
14 FEB 19 2014
14 FEB 19 2014

ARTICLES OF ORGANIZATION

OF

HEAVENLY TOUCH MASSAGE OF PALM BAY, LLC

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, Florida Statutes Chapter 605, hereby makes, acknowledges, and files the following Articles of Organization.

ARTICLE I – NAME

The name of the limited liability company is **HEAVENLY TOUCH MASSAGE OF PALM BAY, LLC**, ("Company").

ARTICLE II – ADDRESS

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

Principal Office Address:

4640 Lipscomb Street, NE
Suite 16
Palm Bay, FL 32905

Mailing Address:

4640 Lipscomb Street, NE
Suite 16
Palm Bay, FL 32905

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

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

Trizia G. Eavenson
Moore Eavenson Baughan, PLC
895 Barton Boulevard, Suite B
Rockledge, Florida 32955

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 605, F.S.


Trizia G. Eavenson

ARTICLE IV

The name and address of each person authorized to manage and control the Limited Liability Company:

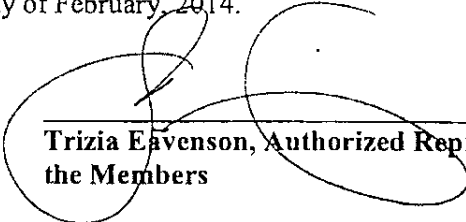
Title:

MGR/AMBR

Name and Address:

Jerilyn A. Dalton
4640 Lipscomb Street, NE
Suite 16
Palm Bay, FL 32905

IN WITNESS WHEREOF, the undersigned, an authorized representative of the members, has made and subscribed these Articles of Organization at Rockledge, Florida, for the foregoing uses and purposes, this 17th day of February, 2014.



**Trizia Eavenson, Authorized Representative of
the Members**

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