Division of Corpor tions

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Address:

FLORIDA LIMITED LIABILITY CO. TWO BLACK SHEEP CLOTHING, LLC

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December 1, 2014

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CORP USA

SUBJECT: TWO BLACK SPEEP CLOTHING, LLC

REF: W14000071118

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Neysa Culligan Regulatory Specialist II FAX Aud. #: H14000275060 Letter Number: 314A00025160

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P.O BOX 6327 - Tallahassee, Florida 32314

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ARTICLES OF ORGANIZATION OF Two Black Sheep Clothing, LLC

The undersigned does hereby subscribe to and file these Articles of Organization for the purpose of organizing a limited liability company under the Florida Limited Liability Company Act.

ARTICLE I NAME

The name of this limited liability company is:

Two Black Sheep Clothing, LLC

ARTICLE II PRINCIPAL OFFICE/MAILING ADDRESS

The principal office and mailing address of this limited liability company is:

210 Dixie Drive Suite C5 Tallahassee, FL 32304

ARTICLE III REGISTERED AGENT, REGISTERED OFFICE AND REGISTERED AGENT'S SIGNATURE

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

Tova Palomino

5758 NW 119* Terrace

Coral Springs, FL 33076

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.

SECRETARY OF STATE TAIN ANASSFE, FLORIDA

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ARTICLE IV MANAGEMENT

The limited liability company is to be managed by its members and is, therefore, a member-managed company. The name and address of each Manager or Managing Member is as Follows:

Tova Palomino 5758 NW 119* Terrace Coral Springs, FL 33076

Manager

Brittiney Bryant 210 Dixie Drive Suite C5 Tallahussee, FL 32304 Manager

Tova Palomino

Authorized Representative of the Member the accordance with Section 603.0203(1)(b), Florida Suantes, the execution of this document constitutes an affirmation under penaltics of perjury that the facts gated herein are true.)

28 NOV 26 NN 9: 55
SECKETARY OF STATE
AND ANASSEE, FLORIDA

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