

**Electronic Articles of Organization
For
Florida Limited Liability Company**

**L15000067190
FILED 8:00 AM
April 16, 2015
Sec. Of State
tjschroeder**

Article I

The name of the Limited Liability Company is:

THE STRAND HAIR STUDIO LLC

Article II

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

1854 TRADE CENTER WAY
200
NAPLES, FL. US 34109

The mailing address of the Limited Liability Company is:

1854 TRADE CENTER WAY
200
NAPLES, FL. US 34109

Article III

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

PETER A SCHECKENHOFER II
8010 VIA SARDINIA WAY
302
ESTERO, FL. 33928

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.

Registered Agent Signature: PETER A SCHECKENHOFER II

Article IV

The name and address of person(s) authorized to manage LLC:

Title: AMBR
PETER A SCHECKENHOFER II
8010 VIA SARDINIA WAY #302
ESTERO, FL. 33928 US

Title: AMBR
PETER R SCHECKENHOFER
23161 FASHION DRIVE #202
ESTERO, FL. 33928 US

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Article V

The effective date for this Limited Liability Company shall be:

04/16/2015

Signature of member or an authorized representative

Electronic Signature: PETER A SCHECKENHOFER II

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.