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(Cit	ty/State/Zip/Phone	e #)
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JUN 0 4 ZOTS

T. SCOTT



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06/01/15--01034--001 *



COVER LETTER

Division of C	orporations		
Salon O SUBJECT:	,		
DODGIIC I.	Name of Li	nited Liability Company	
The enclosed Articles of	of Organization and fee(s) ar	re submitted for filing.	
Please return all corres	pondence concerning this m	atter to the following:	
Olga Mina	ya		
		Name of Person	
Salon O			
		Firm/Company	
2031 Ipsde	n Drive		
	, , , , , , , , , , , , , , , , , , , ,	Address	
Orlando FI	L 32837		
bloomip09@		City/State and Zip Code	
	E-mail address: (to be used	for future annual report notificat	ion)
For further information of	concerning this matter, pleas	e call:	
Olga minay		07 697 8320)	
Na		rea Code Daytime Telephor	ne Number
Enclosed is a check for	the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address

TO:

Registration Section

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

TICLE II - Address:		ility Company, "L.L.C.," or "LLC.")
		•
	et address of the principal office of	of the Limited Liability Company is:
<u>Prir</u>	ncipal Office Address:	Mailing Address:
7335 West sand I	Lake Road	2031 Ipsden drive
Orlando FL 3281		Orlando Fl 32837
Limited Liability Comp ner business entity with	Agent, Registered Office, & Repany cannot serve as its own Register an active Florida registration.) reet address of the registered agent Olga M	stered Agent. You must designate an individual or at are:
e Limited Liability Comp ther business entity with	pany cannot serve as its own Regis an active Florida registration.) reet address of the registered agen Olga M	stered Agent. You must designate an individual or at are: Sinaya ne
e Limited Liability Comp ther business entity with	pany cannot serve as its own Regis an active Florida registration.) reet address of the registered agen Olga M Nan	stered Agent. You must designate an individual or it are: finaya ne den drive
e Limited Liability Comp ther business entity with	pany cannot serve as its own Registration.) reet address of the registered agent Olga M Nan 2031 Ipse	stered Agent. You must designate an individual or it are: finaya ne den drive

(CONTINUED)

Page 1 of 2

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Title:	Name and Address:
"AMBR" = Authorized	ember
"MGR" = Manager	
"AMBER"	Olga Minaya
	2031 ipsden drive
	Orlando fl32837
# A A A A A A A A A A A A A A A A A A A	
"AMBER"	Paul Bloomfield
	2031 Ipsden drive, Orlando Fl 32837
	2031 ipsacii arrve, Oriando 17 32837
(Lise attachment if neces	· · · · · · · · · · · · · · · · · · ·
ective date is listed, the of filing.) The date inserted in this	r than the date of filing: 25th May, 2015 (OPTIONAL) te must be specific and cannot be more than five business days prior to or 90 da ock does not meet the applicable statutory filing requirements, this date will not be
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ARTICLE IV-