

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

L17000023898  
FILED 8:00 AM  
January 30, 2017  
Sec. Of State  
cmwood

**Article I**

The name of the Limited Liability Company is:  
SALON 19 OF HOMOSASSA LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
10550 W. NEW YORK ST.  
HOMOSASSA, FL. 34448

The mailing address of the Limited Liability Company is:  
PO BOX 546  
HOMOSASSA SPRINGS, FL. 24447

**Article III**

Other provisions, if any:  
COSMETOLOGY SALON SERVICES

**Article IV**

The name and Florida street address of the registered agent is:  
CHRISTINA S SLAGHT  
10550 W. NEW YORK ST.  
HOMOSASSA, FL. 34448

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: CHRISTINA SLAGHT

## **Article V**

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

Title: MGR  
CHRISTINA S SLAGHT  
10550 W. NEW YORK ST.  
HOMOSASSA, FL. 34448

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Signature of member or an authorized representative

Electronic Signature: CHRISTINA SLAGHT

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.