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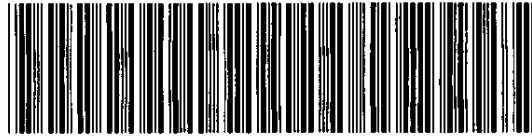
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NAME: SALONPLEX CF LLC

TYPE OF FILING: ARTICLES

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**ARTICLES OF ORGANIZATION FOR A
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I NAME

The name of the Limited Liability Company is:

SALONPLEX CF LLC

ARTICLE II ADDRESS

The principal address of the Limited Liability Company is:

4460 FOWLER STREET UNIT 3

FORT MYERS, FLORIDA 33901

The mailing address of the Limited Liability Company is:

1222 SE 47TH STREET

CAPE CORAL, FLORIDA 33904

ARTICLE III REGISTERED AGENT

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

SUPERBIZ REGISTERED AGENT, INC.

2761 VISTA PARKWAY, STE E4

WEST PALM BEACH, FLORIDA 33411

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.



TRACY COTTLE / Registered Agent's signature

PAGE 2 SALONPLEX CF LLC

ARTICLE IV AUTHORIZED PERSON(S)

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

AUTHORIZED MEMBER
SALONPLEX HOLDINGS, LLC
1222 SE 47TH STREET
CAPE CORAL, FLORIDA 33904

X DEREK BISHOP / Authorized Representative's signature

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any 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.)

[illegible]