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TALLAHASSEE FLORIDA

**FLORIDA LIMITED LIABILITY CO.
TIME 4 ME NAILS & SPA, LLC**

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

SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE I - NAME

The name and address of this Limited Liability Company shall be:

TIME 4 ME NAILS & SPA, LLC

ARTICLE II - ADDRESS


5519 S University Drive
Davie, FL 33328

**ARTICLE III - NAME OF REGISTERED
AGENT, ADDRESS OF REGISTERED OFFICE
AND REGISTERED AGENT'S SIGNATURE**

The name and street address of the L.L.C.'s initial registered resident agent shall be:

Bernardo C. Tacoronte
8500 West Flagler St Ste B-208
Miami, FL 33144

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.

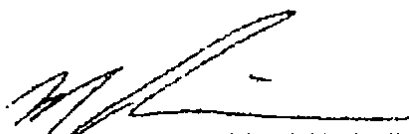

Registered Agent's Signature

ARTICLE IV - MANAGEMENT

The Limited Liability Company is to be managed by one or more managers and is; therefore, a manager-managed company.

Maylen C Piedra "MGRM"
18670 NW 78 AVE
Hialeah, FL 33015

Teresita C Monreal "MGRM"
16263 NW 86 CT
Miami Lakes, FL 33016



Signature of a member or an authorized representative of a member.

(In accordance with section 605.02.03(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.817.435, F.S.)

Maylen C. Piedra

Printed name of signature

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SECRETARY OF STATE
TALLAHASSEE FLORIDA