

L1700239211

kelly Foulk
(Requestor's Name)

1000 High Road
(Address)

Apt. 605
(Address)

Tallahassee, FL 32304
(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

Ethos Lifestyle LLC
(Business Entity Name)

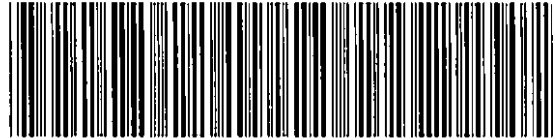
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**ARTICLES OF ORGANIZATION
OF
Ethos Lifestyle, LLC.**

Pursuant to the Limited Liability Company Act of the state of Florida, the undersigned adopt the following articles of organization.

ARTICLE I.

NAME. The name of the limited liability company is Ethos Lifestyle, LLC.

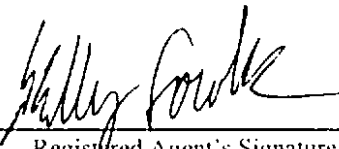
ARTICLE II.

DESIGNATED OFFICE. The mailing and street address of the principal office of the limited liability company is 1000 High Rd, Apt. 605, Tallahassee FL 32304.

ARTICLE III.

AGENT FOR SERVICE OF PROCESS. The name of the initial agent for service of process of the limited liability company is Kelly Foulk, whose street address is 1000 High Rd, Apt. 605, Tallahassee FL 32304.

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.

ORGANIZERS. The name, title, and address of each of the organizers of the limited liability company are:

Kelly Foulk

1000 High Rd, Apt. 605
Tallahassee FL 32304

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ARTICLE V.

TERM. The limited liability company is not organized for a specific term and will remain in existence until terminated under the terms of its operating agreement or the Limited Liability Company Act of the state of Florida.

ARTICLE VI.

MANAGEMENT. The limited liability company will be managed by its members.

ARTICLE VII.

MEMBER LIABILITY. None of the members of the limited liability company will be responsible for its debts and obligations.

REQUIRED SIGNATURE:

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.



Kelly Foulk

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STATE
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