To: 18506176381 From: 12143052508 Date: 05/16/18 Time: 9:19 AM Page: 01/04

# 5/16/2018) Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LEGALINC CORPORATE SERVICES INC.

Account Number : I20180000011 Phone : (844)386-0178 Fax Number : (214)317-4754

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### FLORIDA LIMITED LIABILITY CO. STYLE INNOVATION COMPANY, LLC

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE 1 - NAME

The name of the Limited Liability Company is: STYLE INNOVATION COMPANY, LLC

#### ARTICLE II- ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is 2311 Somerset Place, Naples, FL 34120.

#### ARTICLE III- DURATION

This limited liability company shall have perpetual existence.

#### ARTICLE IV- MANAGEMENT

The Limited Liability Company is to be managed by its Manager, Nicholas McCarty, 2311 Somerset Place, Naples, FL 34120.

#### ARTICLE V- INITIAL REGISTERED AGENT AND OFFICE

The initial registered agent for this limited liability company and the street address of the initial registered agent is: Jeffrey R. Eisensmith, P.A., 5561 N. University Drive, Suite 103. Coral Springs, Florida 33067.

#### ARTICLE VII- REGULATIONS

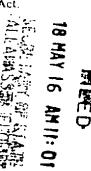
The regulations of this limited liability company may only be adopted, amended, altered or repealed by vote of a majority of the members.

#### ARTICLE VIII - MEMBERS' RIGHT TO CONTINUE BUSINESS

The members remaining after the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member, or after any other event which terminates the membership of a member, have the right to continue the business of this limited liability company subject to approval by unanimous vote of the remaining members; provided that at lease two members remain.

#### ARTICLE IX - AMENDMENT

This limited liability company reserves the right to amend, after or repeal any provision contained in these Articles of Organization in accordance with the Florida Limited Liability Company Act.



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Nicholas McCarty, Manager

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## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 605.0203 (1)(h), Florida Statutes, the undersigned Limited Liability Company submits the following statement in designating the registered office/registered agent, in the State of Florida

- 1. The name of the Limited Liability Company is: STYLE INNOVATION COMPANY, LLC
- 2. The name and address of the registered agent and office is; JEFFREY R. EISENSMITH, P.A., 5561 N. University Drive, Suite 103, Coral Springs, Florida 33067.

Having been named as a 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.

Signature

Date

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