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Certified Copies	_ Certificates	of Status
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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: Hair Like That Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Vette Thomas
Name of Person
127 Bragg Drive
Sikingh @ hothyuil. (Con- E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount: \$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status Certificate of Status (additional copy is enclosed) Certified Copy (additional copy is enclosed)
Mailing Address New Filing Section Division of Corporations Street Address New Filing Section Division of Corporations

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle.
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.	·')
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company	is:
Principal Office Address: Mailing	Address:
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate	an individual or
another business entity with an active Florida registration.)	
The name and the Florida street address of the registered agent are:	
livette Thomas	
Name	
127 Braga Drive	
Florida street address (P.O. Box NOT acceptable)	/
Tallahasee, Fr 32305	>
City State Zip	•

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 l am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

City

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-