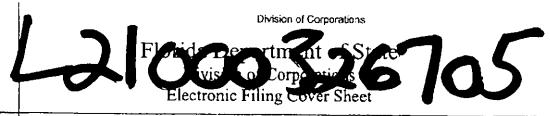
7/16/2021



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Division of Corporations

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Account Number : I20100000009 : (305)599-0839

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Email Address:_

FLORIDA LIMITED LIABILITY CO.

Wild Honey Esthetics, LLC

Certificate of Status	0	
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JUL :

ARTICLES OF ORIGANIZATION FOR FLORIDA LIMITED . LIABILITY COMPANY

<u>ARTICLE I</u>	NA:	ME
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The name of the Limited Liability Company is: Wild Honey Esthetics, LLC

ARTICLE II PRINCIPAL AND MAILING OFFICE ADDRESS

The principal place of business/mailing address is:

Principal and Mailing Address: 5855 Fishhawk Ridge Road

Lithia FL 33547

Registered Agent, Registered Office & Registered Agent's Signature:

The name and Florida Street address of the initial registered agent is: Alyssa Longanecker

5855 Fishhawk Ridge Drive

Lithia FL 33547

Having bless named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to not in this expacity. 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 FS

antiture Registered Agent ARTICLE IV Managing Member(s) Alyssa Longanecker 5855 Fishhawk Ridge Drive Lithia FL 33547 The name and address of the Managing Member(s) is as follows:

ARTICLE V EFFECTIVE
The effective date of this filing: EFFECTIVE DATE

Immediately upon filing.

Signature of managing member: In accordance with section 60 5.0203 Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.