

MO20000000322

Nicole Workman
17904 Sheltered Ridge Lane
Tampa, FL 33647

January 28 2002\

Secretary of State
Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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-02/05/02--01030--018
****175.00 ****125.00

Dear Sir/Madam:

Enclosed for processing, please find the following: (1) Certificate of Designation of Registered Agent/Registered Office; (2) Application for Foreign Limited Liability Company (with attached Certificate of Existence); and (3) Application for Registration of Fictitious Name. I have also enclosed a check in the amount of \$175.00 for the filing fee.

If you have any questions regarding this matter, please feel free to contact me.

Very truly yours,

Nicole Workman

Nicole Workman

FILED
02 FEB -4 PM 9 05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

mtu
2/8

FF \$125.00

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN
LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. Woodsnik II, LLC
(Name of foreign limited liability company)
2. Indiana 3. 35-2124559
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. 11/16/00 5. perpetual
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6. upon qualification
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. 17904 Sheltered Ridge Lane
Tampa, FL 33647
(Street address of principal office)

8. If limited liability company is a manager-managed company, check here ☐

9. The name and usual business addresses of the managing members or managers are as follows:

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: _____

hair salon

Nicole Workman

Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Nicole Workman

Typed or printed name of signee

FILED
02 FEB - 4 PM 9:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

Woodsnik II, LLC

2. The name and the Florida street address of the registered agent and office are:

Nicole Workman

(Name)

17904 Sheltered Ridge Lane

Florida street address (P.O. Box **NOT** ACCEPTABLE)

Tampa, FL 33647

(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 I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Nicole Workman

(Signature)

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

FILED
02 FEB -4 PM 3:05
TALLAHASSEE, FL
SECRETARY OF STATE

**STATE OF INDIANA
OFFICE OF THE SECRETARY OF STATE
CERTIFICATE OF EXISTENCE**

To Whom These Presents Come, Greeting:

I, SUE ANNE GILROY, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

WOODSNIK II, LLC

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on November 16, 2000, and was in existence or authorized to transact business in the State of Indiana on January 16, 2002.

I further certify this Domestic Limited Liability Company (LLC) has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the City of Indianapolis, this Seventeenth Day of January, 2002.

Sue Anne Gilroy

SUE ANNE GILROY, Secretary of State

FILED
02 FEB 14 PM 9:05
SECRETARY OF STATE
INDIANAPOLIS, INDIANA

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