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DATE:

04-07-06

NAME: RESTYLERS' CHOICE, LLC

TYPE OF FILING: ARTICLES OF CORRECTION

COST: \$25 + \$30= \$55

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ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HO

# ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608.4115, F.S., this document is being submitted within the required 30 business days to correct the attached articles of organization or application to transact business in Florida.

FIRST Restylen	The name of the limited liability company is: s' Choice, LLC	
SECO1	ND: The articles of organization or the application to transact business	
(CH	ECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT	
	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:  The incorrect statement of managers: "Mr. Douglas Krasne, 59 Tech View Drive, Cincinnati, Ohio 45215;	
	M. Kathy Krasne, 59 Tech View Drive, Cincinnati, Ohio 45215" The last names of these two managers were	
	incorrectly stated. The correct statement: "Mr. Douglas Jacobs, 59 Tech View Drive, Cincinnati, Ohio 45215;	
:	Ms. Kathy Jacobs, 59 Tech View Drive, Cincinnati, Chio 45215." The other two managers listed are correct.	
	<u>OR</u>	
Was defectively signed. The manner in which the document was defectively sthe appropriate correction are as follows:		
	April 6 3 2008	
Dated:	April 6 2006	
	Signature of a member or anthorized representative of a member	
	Mark Hedrick 1	
	Typed or printed name of signee	
	Filing Fee: \$25.00 Certified Copy: \$30.90 (ontional)	

CR2E062 (0\$/05)

#### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN PLORIDA

IN COMPLIANCE WITH SECTION 628503, FLORIDA STATULES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1. Restylers' Choice, LLC (Name of Poreign Limited Liability Company) 2. Delaware (Aurisdiction under the law of which foreign limited liability company is organized) (FBI number, if applicable) 5. Perpetual 4 June 3, 2004 (Duration: Year limited liability company will cease to (Date of Organization) odst or "perpetual") (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 7, 59 Tech View Drive Cincinnati, Ohio 45215 (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: Mr. Richard Krasne, 5923 Gateway West, El Paso, Texas 79925; Mr. Alan Krasne, 5923 Gateway West, El Paso, Texas 79925; Mr. Douglas Krasne, 59 Tech View Drive, Cincinnati, Ohio 45215; Ms. Kathy Krasne, 59 Tech View Drive, Cincinnati, Ohio 45215 10. Attached is an original certificate of existence, no more than 90 days old, duly authoriticated by the official having custody of records in frejuricileur 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 eath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: Sale of auto trim accessories Signature of a member or an authorized representative of a member. (In accordance with section 608 A08(3), F.S., the execution of this document constitutes an affirmation under the parallers of perjuty that the facts stated herein are true.)

Typed or printed name of signee

Mark Hedrick

#### 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: Restylers' Choice, LLC	
2. The name and the Plorida street address of the registered agent and office are:	
Capitol Corporate Services, Inc.	SECURITY OF THE SECURITY OF TH
1333 North Duval Street	1AR 30
Fiorida Street Address (P.O. Box NOT ACCEPTABLE)	
Tallahassee PI 32303 City/State/Zip	5 LT 17

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 orgent 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, Florida Statutes.

Carlo Wudle asst sec.

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

Delaware

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## The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "RESTYLERS' CHOICE, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE EIGHTH DAY OF MARCH, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE BAID "RESTYLERS' CHOICE, LLC" WAS FORMED ON THE THIRD DAY OF JUNE, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

Harriet Smith Wi

3811343 8300

060228952

Warret Smith Hinden
Harriet Smith Windson, Socretary of State

AUTHENTICATION: 4577149

DATE: 03-08-06