## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H17000219569 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : M. BURR KEIM COMPANY

Account Number : I19990000242 : (215)563-8113 : (215)977-9386 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

£mail	Address	: _
-------	---------	-----

## FLORIDA LIMITED LIABILITY CO. **HG Beauty Properties LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Monu

Help

M BURR KEIM CO (((H170002195693))) \*

ARTICLE I - Name: The name of the Limned Lis	ibility Company is:			
HG Beauty Prop				
(Must	contain the words "Limite	d Liability Company	."L.L.C.," or "LLC.")	
RTICLE II - Address: he mailing address and stre	et address of the principal	office of the Limite	l Liability Company is:	
<u>Prio</u>	Principal Office Address:		Mailing Address:	
12055 SW 42nd Manor, Apt. 112			12055 SW 42nd Manor, Apt. 112	
12055 SW 42nd	Manor, Apt. 112	120	55 SW 42nd Manor, Apt. 112	
Miramar, FL 330  RTICLE III - Registered The Limited Liability Comp	Agent, Registered Office eany cannot serve as its ov	Miles, & Registered Agent.	55 SW 42nd Manor, Apt. 112 amar, FL 33025 nt's Signature: You must designate an individual or	
Miramar, FL 330  RTICLE III - Registered The Limited Liability Compother business entity with	Agent, Registered Office cany cannot serve as its over an active Florida registrate eet address of the register	Miles, & Registered Agent on Registered Agent tion.)	amar, FL 33025 nt's Signature:	
Miramar, FL 330  RTICLE III - Registered The Limited Liability Compositer business entity with	Agent, Registered Office cany cannot serve as its over an active Florida registrat	Miles, & Registered Agent on Registered Agent tion.)	amar, FL 33025 nt's Signature:	
Miramar, FL 330	Agent, Registered Office cany cannot serve as its over an active Florida registrate eet address of the register	Miles, & Registered Agent. Mines agent are.	amar, FL 33025 nt's Signature:	
Miramar, FL 330  RTICLE III - Registered The Limited Liability Composition of the business entity with	Agent, Registered Office cany cannot serve as its over an active Florida registrate eet address of the register Elizabeth Gomez	Miles, & Registered Agent. Mines agent are.	amar, FL 33025  nt's Signature: You must designate an individual or	
Miramar, FL 330  RTICLE III - Registered The Limited Liability Composite business entity with	Agent, Registered Office cany cannot serve as its over an active Florida registrate eet address of the register Elizabeth Gomez	Miles, & Registered Agent.  Michael Agent.  Michael Agent.  Michael Agent.  Michael Agent.  Name  Janor, Apt. 112	amar, FL 33025  nt's Signature: You must designate an individual or	

Registered Agent's Signature (REQUIRED)

(CONTINUED)

(((H170002195693)))

Title: "AMBR" = Authorized Member	Name and Address:		
"MGR" = Manager AMBR	HG Beauty Holdings LLC		
	12055 SW 42nd Manor, Apt. 112 Miramar, FL 33025		
<del></del>			
···		ASS.	- <u>+</u>
			7 AI
(Use attachment if necessary)		34 - C	77 <b>~</b>
TICLEV: Effective date, if other than the date of filing	(OPTIONAL)		7 [
an effective date is fisted, the date must be specific an	d enunot be more than five business days prior to or 90	·	•
date of filing.)			
date of filing.)	applicable statutory filing requirements, this date will not	-	
edate of filing.) ote: If the date inserted in this block does not meet the	applicable statutory filing requirements, this date will not	<u> </u>	
edate of filing.)  ote: If the date inserted in this block does not meet the educament's effective date on the Department of State'  KITCLE VI: Other provisions, if any.	applicable statutory filing requirements, this date will not	-	
edate of filing.)  ote: If the date inserted in this block does not meet the educament's effective date on the Department of State'  KITCLE VI: Other provisions, if any.	applicable statutory filing requirements, this date will not s records.	-	
date of filing.)  tte: If the date inserted in this block does not meet the education of State.  TICLE VI: Other provisions, if any.	applicable statutory filing requirements, this date will not s records.	-	
edate of filing.)  tte: If the date inserted in this block does not meet the educament's effective date on the Department of State'  TTICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a member of This document is executed in accounted.	applicable statutory filing requirements, this date will not s records.	-	

Elizabeth Gomez, Authorized Representative

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

5 30.08 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)