

To:

Page 1 of 4

2024-05-13 20:44:32 GMT

30532 177

From: Yanet Avila

L24 000212886

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.

((H24000172819 3)))



H240001728193ABC1

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 : EXPRESS CORPORATE FILING SERVICE INC.
Account Number : T20000000146
Phone : (305)444-4994
Fax Number : (305)328-4774

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

Email Address: _____

FLORIDA LIMITED LIABILITY CO.
SKIN LOCAL MIDTOWN LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

RECEIVED

2024 MAY 13 PM 5:13

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
COMMERCIAL SERVICES

Electronic Filing Menu

Corporate Filing Menu

Help

5/14/24
3

MS

**ARTICLES OF ORGANIZATION FOR
SKIN LOCAL MIDTOWN LLC**

ARTICLE I – NAME:

The name of the Limited Liability Company is: SKIN LOCAL MIDTOWN LLC

ARTICLE II – ADDRESS:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

9410 SW 77 AVENUE
MIAMI, FL 33156

Mailing Address:

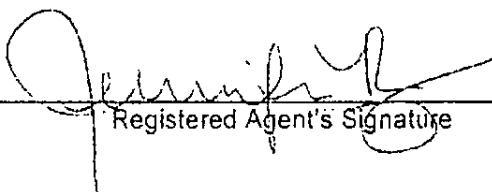
9410 SW 77 AVENUE
MIAMI, FL 33156

ARTICLE III – REGISTERED AGENT:

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

Ruz & Ruz PL
255 Alhambra Circle
Suite 500A
Coral Gables, FL 33134

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 605, F.S.



Registered Agent's Signature

ARTICLE IV – AUTHORIZED PERSONS:

The name and address of each person authorized to manage and control the Limited Liability Company are:

Title
MGR

Name & Address
Jennifer Martinez
9410 SW 77 AVENUE
MIAMI, FL 33156

Title
MGR

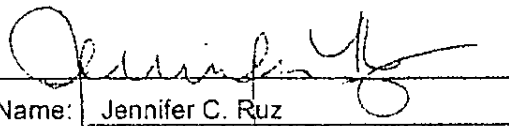
Name & Address
Ana Chamorro Rubiales
9410 SW 77 AVENUE
MIAMI, FL 33156

ARTICLE V – EFFECTIVE DATE:

The effective date of these Articles of Organization is the date of filing.

REQUIRED SIGNATURE:

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third-degree felony as provided for in s.817.155, F.S.


Name: Jennifer C. Ruz