

A060000001417

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

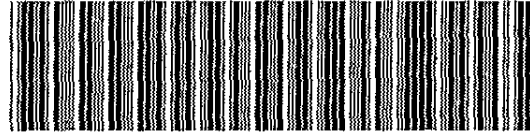
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
06 DEC -6 AM 11:00

J. BRYAN DEC -7 2006

**STEVEN A. SCIARRETTA, P.A.**

ATTORNEYS AT LAW

STEVEN A. SCIARRETTA  
LL.M. IN TAXATION

THE HAMILTON BUILDING  
2799 NW Boca Raton Blvd., Suite 203  
Boca Raton, Florida 33431  
TELEPHONE: (561) 368-7978  
TOLL FREE: (800) 545-8454  
TELEFAX: (561) 368-8502

Asset Protection  
Business and Taxation Planning  
Probate Administration  
Trusts and Estate Planning

VIA NEXT DAY DHL

December 1, 2006

State of Florida  
Department of State  
Registration Section  
Division of Corporations  
2661 Executive Center Circle  
Tallahassee, FL 32301

Re: STEAL YOUR FACE MANAGEMENT LLC  
STEAL YOUR FACE LLLP

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
06 DEC -6 AM 11:01

Dear Sir/Madam:

Please find enclosed for filing two (2) original Articles of Organization for the above LLC and two (2) original Certificates for the above LLLP. Please first certify the LLC, as it will act as General partner for the LLLP

Also enclosed is our check for \$1,277.50, made payable to the Florida Department of State, which represents all appropriate filing fees for both entities.

Please return the completed paperwork to me at the address noted above. A self-addressed, pre-paid DHL envelope is enclosed for your convenience.

Thank you for your prompt cooperation.

Sincerely,

STEVEN A. SCIARRETTA, P.A.

  
Steven A. Sciarretta

SAS/dc  
Enclosures

**CERTIFICATE OF LIMITED LIABILITY LIMITED PARTNERSHIP  
OF  
STEAL YOUR FACE LLLP**

1. STEAL YOUR FACE LLLP

(name of Limited Liability Limited Partnership must contain a suffix such as "Limited Liability Limited Partnership", "L.L.L.P." or "LLLP")

2. 12661 Yardley Drive, Boca Raton, FL 33428

(The business address of the Limited Partnership)

3. Brad R. Friedman

(Name of Registered Agent for Service of Process)

4. 12661 Yardley Drive, Boca Raton, FL 33428

(Florida street address of Registered Agent)

5. 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Brad Friedman  
(Registered Agent must sign here to accept designation as Registered Agent)

6. Set forth on Line #2

(The mailing address of the Limited Partnership)

7. This Limited Partnership elects to be a Limited Liability Limited Partnership.

8. NAME OF GENERAL PARTNER

SPECIFIC ADDRESS

STEAL YOUR FACE MANAGEMENT LLC

12661 Yardley Drive  
Boca Raton, FL 33428

#L06000116730

9. The effective date of this limited liability limited partnership shall be the date of filing.

Signed this 1<sup>st</sup> day of December, 2006  
Signature of General Partner:

Brad Friedman

Brad R. Friedman  
On behalf of STEAL YOUR FACE Management, LLC

FILED STATE  
SECRETARY OF CORPORATIONS  
06 DEC -6 AM 11:01