

MIX Cosmetics
LO20000

16801

Natalie Anderson
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HOME 305-931-5521
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-07/03/02--01055--001
****25.00 ****25.00

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-06/06/02--01057--006
****105.00 ****105.00

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02 JUL - 2 PM 1:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

855, 676, 2848, 671

1002-16871
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1st



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

June 11, 2002

NATALIE PAIGE ANDERSON
20515 EAST COUNTRY CLUB DRIVE 949
AVENTURA, FL 33180

SUBJECT: MIX COSMETICS
Ref. Number: W02000016871

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for MIX COSMETICS and your check(s) totaling \$105.00. However, the document has not been filed and is being retained in this office for the following:

There is a balance due of \$20.00.

The name of a limited liability company must contain the designation "L.L.C.," "LLC," "L.C.," or "LC," or the words "LIMITED LIABILITY COMPANY," or "LIMITED COMPANY." Please amend the name of your entity accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Marsha Thomas
Document Specialist

Letter Number: 702A00038187

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

MIXX COSMETICS L.L.C.

ARTICLE II - Address:

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

20515 EAST COUNTRY CLUB DR. 949 AVENTURA, FL 33180

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

NATALIE ANDERSON

Name

20515 E. COUNTRY CLUB DR. 949

Florida street address (P.O. Box NOT acceptable)

AVENTURA FL 33180

City, State, and Zip

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SECRETARY OF STATE

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.

Natalie Anderson

Registered Agent's Signature

Article IV - Management (Check box if applicable.)

- ☐ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

Natalie Anderson

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

NATALIE ANDERSON

Typed or printed name of signee

Filing Fees:

- \$100.00 Filing Fee for Articles of Organization ✓
\$ 25.00 Designation of Registered Agent ✓
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional) ✓