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OFFICE USE ONLY(DOCUMENT #) LAZARUS CORPORATE FILING SERVICE 3320 S.W. 87 AVENUE MIAMI, FLORIDA (305)552-5973 OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): (Corporation Name) (Document #) (Document #) (Corporation Name) (Document #) Pick up time 2.00 Walk in Certified Copy. Mail out Will wait Photocopy Certificate of Status NEW FILINGS **AMENDMENTS** Profit Amendment NonProfit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Dissolution/Withdrawal Domestication Merger Other REGISTRATION/ OTHER FILIGS QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement

Trademark

Other

Examiner's Initials

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## **ARTICLE I**

The name of the Limited Liability Company is:

THE REAL YOU, LLC



# ARTICLE II

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

144 ROSALES CT CORAL GABLES, FL 33143

## **ARTICLE III**

The purpose of which this Limited Liability Company is organized is:

ANY AND ALL LAWFUL BUSINESS

### ARTICLE IV

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

ALBERTO BAROUH

13165 S.W. 142 TERRACE Florida street address

> MIAMI, FL 33186 City, State, and Zip

# **ARTICLE V**

The effective date of the Limited Liability Company will be:

**APRIL 15, 2004** 

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## **ARTICLE VI**

The name and address of managing members/managers are:

Title: MANAGER-MEMBER MARGARITA M. ISAZA 3400 SW 27TH AVE. # 1102 Miami, FL 33133 SS #: 772-16-9511

Title: MANAGER-MEMBER VANESSA VALERA 144 ROSALES CT CORAL GABLES, FL 33143 SS # 770-28-7962

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 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.

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.)

MARGARITA M, ISAZA
Typed or printed name of signee