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04 AUG 13 PM 2:51  
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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
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**LAZARUS CORPORATE FILING SERVICE**

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04 AUG 13 PM 2:51  
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TALLAHASSEE, FLORIDA

**CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):**

1. ANA'S LASTING IMPRESSIONS, LLC  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

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☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input checked="" type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

**ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**FILED**  
04 AUG 13 PM 2:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I – Name:**

The name of the Limited Liability Company is:

Ana's Lasting Impressions. LLC

**ARTICLE II – Address:**

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

**Principal Office Address:**

10280 S.W. 144 Street  
Miami, FL. 33176

**Mailing Address:**

10280 S.W. 144 Street  
Miami, FL. 33176

**ARTICLE III – Register Agent, Register Office & Register Agent Signature:**

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

Ana Cantens

Name

10280 S.W. 144 Street

Florida Street address

Miami, Florida, 33176

City, State, Zip

Having been named as registered agent and to accept service of process for the above stated limited liability Company at the designated in this certificate, I hereby accept 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, Florida Statutes



Registered Agent's Signature

**ARTICLE IV – Manager(s) or Managing Member(s):**

The name and address of each Manager or Managing Member is as follows:

**Title:**

“MGR”= Manager

“MGRM” Manager Member

**Name and Address:**

MGR

Ana Cantens  
10280S.W. 144 St.  
Miami, FL. 33176

  
\_\_\_\_\_  
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 penalties of perjury  
That the facts stated herein are true.)

Ana Cantens  
Typed or printed name of Signee