

W04000068394

Florida Department of State
Division of Corporations
Public Access System

9/20/04

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.

(((H04000186429 3)))

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) 205-0383

From:
Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09 SEP 20 AM 9:04

FILED

LIMITED LIABILITY COMPANY

annie's beauty salon llc

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$155.00

W04-68394
JL



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

September 20, 2004

EMPIRE

SUBJECT: ANNIE'S BEAUTY SALON
REF: W04000034683

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "Ltd. Co." "L.C." or "L.L.C."

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) 245-6967.

Michelle Hodges
Document SpecialistFAX Aud. #: H04000186429
Letter Number: 604A00055289SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 SEP 20 01 9:04

FILED

RECEIVED
04 SEP 20 PM 12:46
DIVISION OF CORPORATIONS

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

104000186429



**ARTICLES OF ORGANIZATION
OF
ANNIE'S BEAUTY SALON LLC**

The undersigned, acting as Authorized Representative of a for profit limited liability company pursuant to chapter 608 of the Florida Statutes, adopt the following Articles of Organization:

**ARTICLE I
NAME**

Pursuant to Florida Statute § 608.406 the name of the Company is ANNIE'S BEAUTY SALON LLC

**ARTICLE II
PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS**

522 NW 57th Avenue
Miami, FL 33134
210

**ARTICLE III
PURPOSE & TERM**

The limited liability company may engage in any activity or business permitted under the laws of the United States of America and the State of Florida, in relation to providing beauty services as would be typical in a beauty salon to clients.

This limited liability company shall have perpetual existence, and as such, the members have the right to continue the business on the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member or the occurrence of any other event that terminates the existence of the limited liability company.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 SEP 20 04 9:03

FILED

1
104000186429

ARTICLE IV
INITIAL REGISTERED AGENT AND OFFICE

Pursuant to Florida Statute § 608.415 the name and street address of the initial registered agent of the limited liability company is:

Maria Del Carmen Perez
5651 SW 7th Street
Miami, FL 33134

ARTICLE V
LIMITATION OF COMPANY POWERS

The company powers of this limited liability company are as provided in Chapter 608, Florida Statutes, unless limited as follows: NONE

ARTICLE VI
MANAGEMENT SHALL BE RESERVED TO THE MEMBERS

This limited liability company shall have two (2) members initially. The number of members may be increased or diminished from time to time by the Regulations and/or Bylaws but shall never be less than one (1). The name and address of the initial members of this limited liability company are :

<u>NAMES</u>	<u>TITLE</u>	<u>INTEREST</u>
Maria Del Carmen Perez	Managing Member	50%
Juan Perez	Managing Member	50%

ARTICLE VII
MANNER OF ELECTION OF MEMBERS

The members will be elected every two (2) years in a special meeting to be held the second Tuesday of the month of January of every year as stated in the Regulations and/or Bylaws of the limited liability company.

ARTICLE VIII
REGULATIONS AND/OR BYLAWS

The Regulations and/or Bylaws of this limited liability company may be adopted, altered, amended or repealed by either the Members.

FILED

04 SEP 20 AM 9:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLE IX
INDEMNIFICATION**

The limited liability company shall indemnify any Member to the full extent permitted by law.

**ARTICLE X
PRINCIPAL LIMITED LIABILITY COMPANY ADDRESS**

The principal address of the limited liability company is: 522 NW 57th Avenue, Miami, FL 33124.

**ARTICLE XI
ADDITIONAL MEMBERS**

No person shall be admitted as a member unless a majority-in-interest of the members consent in writing to the admission of the additional member.

**ARTICLE XII
AUTHORIZED REPRESENTATIVES**

The name and address of the Authorized Representative who has executed these Articles of Organization is:

Maria Del Carmen Perez, 522 NW 7th Avenue, Miami, FL 33134

**ARTICLE XIII
AMENDMENT**

This limited liability company reserves the right to amend or repeal any provisions contained in these Articles of Incorporation in accordance with the provisions of the Florida Limited Liability Company Act.

14 IN WITNESS THEREOF, the undersigned has executed these Articles of Organization, this day of September, 2004.


MARIA DEL CARMEN PEREZ

FILED
04 SEP 20 AM 9:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H041000186429

Articles of Organization
ANNIE'S BEAUTY SALON LLC

ACCEPTANCE BY REGISTERED AGENT

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED LIMITED LIABILITY COMPANY, AT THE PLACE DESIGNATED IN ARTICLE IV OF THESE ARTICLES OF ORGANIZATION, THE UNDERSIGNED HEREBY AGREES TO ACT IN THIS CAPACITY, IS FAMILIAR WITH AND ACCEPTS THE OBLIGATIONS OF THE POSITION AS PROVIDED FOR IN FLORIDA STATUTES CHAPTER 608, AND FURTHER AGREES TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE DISCHARGE OF MY DUTIES.

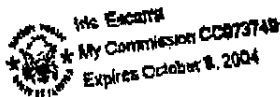
DATED THIS 14 DAY OF SEPTEMBER, 2004.

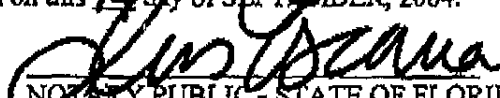


MARIA DEL CARMEN PEREZ

STATE OF FLORIDA)
COUNTY OF MIAMI-DADE)

BEFORE ME, the undersigned authority personally appeared MARIA DEL CARMEN PEREZ, who is personally known to me, or (X) who produced a Florida driver's license as identification and who did not take an oath on this 14 day of SEPTEMBER, 2004.




NOTARY PUBLIC - STATE OF FLORIDA
IRIS ESCARRA
Printed name of Notary

My Commission Expires:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 SEP 20 11 9:05

FILED

H041000186429