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(Requestor's Name)

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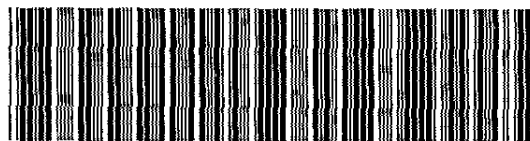
(Business Entity Name)

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

J. BRYAN MAR -2 2006

# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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JMSkin Fresh, LLC

- ☐ Art of Inc. File
- ☐ LTD Partnership File
- ☒ Foreign Corp. File
- ☐ L.C. File
- ☐ Fictitious Name File
- ☐ Trade/Service Mark
- ☐ Merger File
- ☐ Art. of Amend. File
- ☐ RA Resignation
- ☐ Dissolution / Withdrawal
- ☐ Annual Report / Reinstatement
- ☒ Cert. Copy
- ☒ Photo Copy
- ☐ Certificate of Good Standing
- ☐ Certificate of Status
- ☐ Certificate of Fictitious Name
- ☐ Corp Record Search
- ☐ Officer Search
- ☐ Fictitious Search
- ☐ Fictitious Owner Search
- ☐ Vehicle Search
- ☐ Driving Record
- ☐ UCC 1 or 3 File
- ☐ UCC 11 Search
- ☐ UCC 11 Retrieval
- ☐ Courier

Signature

Requested by:

Name

Date

Time

Walk-In

Will Pick Up

*W* *3/1* *2:00*

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

The undersigned, for the purposes of forming a limited liability company for profit, pursuant to the laws of the State of Florida, do hereby adopt the following Articles of Organization:

**ARTICLE I  
NAME**

The name of this Limited Liability Company is **JMSKINFRESH, LLC.**

**ARTICLE II  
ADDRESS**

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

**PRINCIPAL OFFICE ADDRESS:**

P.O. Box 4054  
Fort Lauderdale, FL 33338

**MAILING ADDRESS:**

P.O. Box 4054  
Fort Lauderdale, FL 33338

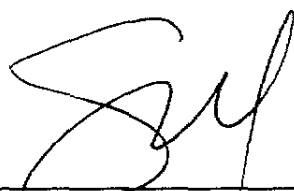
**ARTICLE III  
REGISTERED AGENT, REGISTERED OFFICE AND REGISTERED AGENT'S SIGNATURE**

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

SCOTT A. WEISS, ESQ.  
2550 NE 15<sup>TH</sup> Avenue  
Fort Lauderdale, FL 33305

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, Florida Statutes.

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\_\_\_\_\_  
**SCOTT A. WEISS, ESQ.**  
Registered Agent

**ARTICLE IV**  
**MANAGERS**

The name and addresses of each Manager is as follows:

**JOHN McDONALD**  
P.O. Box 4054  
Fort Lauderdale, FL 33338

IN WITNESS WHEREOF, the undersigned Subscribers have executed these Articles of Organization on this 27<sup>TH</sup> day of February, 2006.

  
\_\_\_\_\_  
**JOHN McDONALD, Manager**

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