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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
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(Business Entity Name)
(Document Number)
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COVER LETTER

TO: Registration Section Division of Corporations SUBJECT: DEAUTY BY HE BAY, LLC.		
(Name of Limited Liability Company) The enclosed Articles of Organization and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
BEAUTY BY THE DAY, LLC.	_	
7120 REGINA DR (Address)		
ENGLEWOOD, FL 34224 (City/State and Zip Code)	_	
For further information concerning this matter, please call: AUPH EICHERT (Name of Person) (Area Code & Daytime Telephone Number)	07 MAR - I A	, ,
Enclosed is a check for the following amount: \$\begin{align*} \text{S125.00 Filing Fee} \text{S130.00 Filing Fee} \text{S130.00 Filing Fee} \text{Certificate of Status} \text{Certified Copy} \text{Certificate of Status} Certificate of Status		•
(additional copy is enclosed) Certified Copy (additional copy is enclosed) Mailing Address Registration Section Division of Corporations (additional copy is enclosed) Street/Courier Address Registration Section Division of Corporations	1)	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 6, 2007

ROBERTA E.M. REICHERT 7120 REGINA DR ENGLEWOOD, FL 34224

SUBJECT: BEAUTY BY THE BAY, LLC

Ref. Number: W0700006160

We have received your document for BEAUTY BY THE BAY, LLC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please remove the suffix LLC and use one that is listed below.

The corporate name must contain a suffix that will clearly indicate that it is corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CORP., and INCORPORATED.

A corporation may not act as its own incorporator. Please designate and individual, another active domestic or foreign corporation, with a street address.

Please return the original and one copy of your document, along with a coperation 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) 245-6928.

Tim Burch
Document Specialist
New Filing Section

Letter Number: 107A00008957

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:
(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
RAUTY BY THE BAY UC ROBORTA REICHERT 14605 McCAUL RD 7120REGINA DIL 34774
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)
The name and the Florida street address of the registered agent are: OPGETAE MECHETET Name Name
7120 REGINADR
Florida street address (P.O. Box NOT acceptable) FL 34724 City, State, and Zip
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
Registered Agent's Signature (REQUIRED)

(CONTINUED) Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

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

,	Title: "MGR" = Manager	Name and Address:	
	"MGRM" = Managing Member	ROBURTA EM REICHERT. 7120 REGINA DR. ENGLEWOOD, FL 34224	
		SECRET:	07 MAR
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	(Use attachment if necessary)		ភា
(If an	CLE V: Effective date, if other than the deffective date is listed, the date must be so days after the date of filing.)	ate of filing: (OPTIONAL) specific and cannot be more than five business days [
	REQUIRED SIGNATURE:	or an authorized representative of a member.	

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

-that the facts stated herein are true

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury