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SECRETARY OF STATE SIVISION OF CORPORATIONS

W08-23878

J. BRYAN

MAY 27 2008

EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 13, 2008

1 6 4 4 7

TORIE MARINO 2 SENSENEY PATH PALM COAST, FL 32164

SUBJECT: GLAMOUROUS BEAUTY, LLC

Ref. Number: W08000023878

and your been filed

We have received your document for GLAMOUROUS BEAUTY, LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We didn't receive the whole form,

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6043.

Joey Bryan Regulatory Specialist II

Letter Number: 308A00030456

COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT:	Glamourous	Beauty, LLC	•
_	(Name of Resulting	g Florida Limited Company	·)
convert an "C	Certificate of Conversion, A Other Business Entity" into a fith s. 608.439, F.S.		
Please return	all correspondence concernir	ng this matter to:	
Torie	Marino		c (
Glam	(Contact Person) Surous Beauty (Firm/Company)	LLC .	
2 Ser	1seney Puth (Address)		
Palm	Coast FL 3216	,4	
	(City, State and Zip Code)		
For further in	formation concerning this ma	atter, please call:	
Torie	Marino	at (386) 9	31-1715 aytime Telephone Number)
(Name	of Contact Person)	(Area Code and D	aytime Telephone Number)
Enclosed is a	check for the following amou	ınt:	
\$150.00 Filin (\$25 for Convers \$125 for Artic of Organization)	sion and Certificate of	□\$180.00 Filing Fees and Certified Copy	□\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET AD Registration S Division of Co Clifton Buildi 2661 Executiv Tallahassee, F	Section orporations ng ve Center Circle	MAILING A Registration Division of C P. O. Box 63 Tallahassee,	Section Corporations 27

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

"LLC.")	OUS BEAUTY, LLC words "Limited Liability Company	y," the abbreviation "L.L.C.," or the designation
ARTICLE II The mailing ac Liability Comp	ldress and street address o	f the principal office of the Limited
Principal Offi	ce Address:	Mailing Address:
)	2 SENSENEY PATH
TORIE MARINO		
ARTICLE III Signature: (The Limited Liabil Individual or anothe	- Registered Agent, Reg	Mailing Address: 2 SENSENEY PATH PALM COAST, FL 32164 istered Office, & Registered Agent's wn Registered Agent. You must designate an
Signature: (The Limited Liabil individual or anothe business entity wit	- Registered Agent, Registred Agent, Registry Company cannot serve as its over than active Florida registration.) the Florida street address of	istered Office, & Registered Agent's
ARTICLE III Signature: (The Limited Liabil individual or anothe business entity wit	- Registered Agent, Registry Company cannot serve as its over the an active Florida registration.)	wn Registered Agent. You must designate an
ARTICLE III Signature: (The Limited Liabil individual or anothe business entity wit	- Registered Agent, Registred Agent, Registered Agent, Registred Agent, Registred Agent, Registred as its over the Agent and Agent A	wn Registered Agent. You must designate an of the registered agent are: Name
ARTICLE III Signature: (The Limited Liabil individual or anothe business entity wit	- Registered Agent, Registred Agent, Registered Agent, Registred Agent, Registred Agent, Registred as its over the Agent and Agent A	wn Registered Agent. You must designate an of the registered agent are:
ARTICLE III Signature: (The Limited Liabil individual or anothe business entity wit	- Registered Agent, Registred Agent, Registered Agent, Registred Agent, Registred Agent, Registred as its over the Agent and Agent A	wn Registered Agent. You must designate an of the registered agent are: Name

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)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

"MGR" = Manager	Name and Address:
'MGRM" = Managing Member	
MGR	TORIE MARINO
	2 SENSENEY PATH
	PALM COAST, FL 32164
	
	<u> </u>
	(Use attachment if necessary)
ective date: 1) cannot be prior to i	(OPTIONAL) nor more than 90 days after the date ent of State; <u>AND</u> 2) must be the sam
ective date: 1) cannot be prior to a nt is filed by the Florida Departmentive date listed in the attached Content of the stacked Content	(OPTIONAL) nor more than 90 days after the date ent of State; <u>AND</u> 2) must be the sam dertificate of Conversion, if an effec
etive date listed in the attached Costed therein.) REQUIRED SIGNATURE: Signature of a member or an au (In accordance with section 608. of this document constitutes an af	(OPTIONAL) nor more than 90 days after the date ant of State; AND 2) must be the same dertificate of Conversion, if an effect thorized representative of a member 408(3), Florida Statutes, the execution firmation under the penalties of perjury
ective date: 1) cannot be prior to a set is filed by the Florida Departmentive date listed in the attached Costed therein.) REQUIRED SIGNATURE: Signature of a member or an au (In accordance with section 608. of this document constitutes an af	(OPTIONAL) nor more than 90 days after the date ant of State; AND 2) must be the same dertificate of Conversion, if an effect thorized representative of a member 408(3), Florida Statutes, the execution
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\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)