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## **COVER LETTER**

TO:

**Registration Section** 

Divis	sion of Corporations	
SUBJECT:	Global Esthetic Center L.L.C.	
562626 ** _	(Name of Limited Liability Company)	<del></del>
The enclosed	Articles of Organization and fee(s) are submitted for filing.	
Please return a	all correspondence concerning this matter to the following:	
Jose	eph Villate	#S 28
<del></del>	(Name of Person)	F0 2 -
Villa	ate, CPA	AFTAF AFTAF
- · · · <del>-</del>	(Firm/Company)	SEY P
454	NW 22 Avenue, STE 209	PHIZ:
	(Address)	25 8
Mia	mi, FL 33125	P
	(City/State and Zip Code)	
For further inf	Formation concerning this matter, please call:	
roi futuei mi	ormation concerning this matter, please can.	
Joseph	Villate 305 541-4714	
	(Name of Person) (Area Code & Daytime Telephone Numb	per)
Enclosed is a	check for the following amount:	
<b>√</b> \$125.00 Fili	Certificate of Status Certified Copy Certificat (additional copy is enclosed) Certified	Filing Fee, the of Status & Copy copy is enclosed)
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301	

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
Global Esthetic Center	
(Must end with the words "Limited Liabil	ity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1394 CORAL WAY	1394 CORAL WAY
MIAMI, FL 33145	MIAMI, FL 33145
The name and the Florida street address of the real Joseph Villate  Name  454 NW 22 Avenu  Florida street add  Miami, FL 33125	Y OF STA
City, State, a	FL and 7:-
Having been named as registered agent and to a liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	accept service of process for the above stated limited his certificate, I hereby accept the appointment as v. I further agree to comply with the provisions of all rformance of my duties, and I am familiar with and stered agent as provided for in Chapter 608, F.S

(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:

<u> </u>	ANGEL M GARCIA 1394 CORAL WAY MIAMI, FL 33145			
GR	LOURDES MARGARITA GARCIA	₽'n	_ 28	
	1394 CORAL WAY			
	MIAMI, FL 33145	28	5	4
GR	JUAN R LANDRON	TARY ASSE	3	
	1394 CORAL WAY	È.O.	70	, FTT
	MIAMI, FL 33145	E.S.		
See Attachment)		ORID		. —
	***************************************			

**ART** (If a to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

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 the penalties of perjury that the facts stated herein are true.)

Typed or printed name of signee

#### Filing Fees:

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

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

(Continuation of Articles of Organization – Global Esthetic Center L.L.C.)

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

Title:	Nam e and Address:
"MGR" = Manager	L C
"MGRM" =Managig Member	T
	SSS
MGR	Eva Landron
	1394 CORAL WAY
	1394 CORAL WAY MIAMI, FL 33145
	<b>2</b>
MGR	Angel R Garcia Saladin Landron
	1394 CORAL WAY
	MIAMI, FL 33145
MGR	Margarita Garcia -Saladin Landron
	1394 CORAL WAY
	MIAMI, FL 33145
	MINIMI, I E 35145
MGR	Hermes A Garcia Landron
<u> </u>	1394 CORAL WAY
	MIAMI, FL 33145
	MIAMI, PL 33143
MGR	Juan R Landron Baba
······································	1394 CORAL WAY
	MIAMI, FL 33145
	17147,014, 1. 12 00 140
MGR	Sally Landron Baba
	1394 CORAL WAY
	MIAMI, FL 33145
	Will in the control of the control o
Non	
MGR	Joev K Landron Baba
	1394 CORAL WAY
	MIAMI, FL 33145