(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
. (Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
L. SELLERS				
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# **COVER LETTER**

	ation Section n of Corporations	
SUBJECT:	;	Sistine Skin, LLC
		nited Liability Company
The enclosed Arr	ticles of Organization and fee(s) a	re submitted for filing.
Please return all	correspondence concerning this m	atter to the following:
	Jess	ica Fronk L'Heureux
		Name of Person
···		Sistine Skin, LLC
		Firm/Company
	1315 N	lorth Bronough Street
		Address
	Tallah	assee, Florida 32303
		City/State and Zip Code
	Fre	onkink@gmail.com
	E-mail address: (to be use	d for future annual report notification)
For further inform	mation concerning this matter, plea	ase call:
J <sub>0</sub>	essica L'Heureux	at ( 305 ) 720-3697
	Name of Person	Area Code & Daytime Telephone Number
Enclosed is a ch	neck for the following amount:	
\$125.00 Filing	Fee \$\int_\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)  \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited	I Liability Company is:			
Sistine Skin, LLC  (Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")				
ARTICLE II - Address The mailing address and		incipal office of the Limited Li	iability Company is:	
Principal Office Addre	<u>:ss:</u>	Mailing Address:		
1315 N. Bronough Str Tallahassee, Florida 3		1315 N. Bronough Street Tallahassee, Florida 3230		
	y cannot serve as its own Regist Florida registration.)	Office, & Registered Agent's tered Agent. You must designate an indiving registered agent are:		
The name and the Floric	Jessica L'H			
	Name	leureux		
	1315 N. Brond	ough Street		
	Florida street address (P.O.	Box NOT acceptable)		
	Tallahassee,	FL		
	City, State, a	nd Zip		
liability company at registered agent and ag statutes relating to the	the place designated in t ree to act in this capacit proper and complete pe	accept service of process for the this certificate, I hereby accept to y. I further agree to comply with the efformance of my duties, and I asstered agent as provided for in (1)	he appointment as h the provisions of all m familiar with and	

(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:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGRM	Jessica Fronk L'Heureux
	1315 N. Bronough Street
	Tallahassee, FL 32303
(Use attachment if necessary)	
CLE V: Effective date, if other than the d	
	specific and cannot be more than five business days pr
0 days after the date of filing.)	
REQUIRED SIGNATURE:	10.
/lexiva	T THEWSEUX
Signature of a member	or an authorized representative of a member.
(In accordance with sect of this document constit that the facts stated here	tion 608.408(3), Florida Statutes, the execution tutes an affirmation under the penalties of perjury
•	F. L'Heureux ed 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)