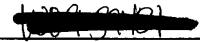
LPRODOPH

· · ·	
(R	equestor's Name)
	•
	ddress)
(A)	uuless)
	•
(A)	ddress)
	•
(C	ity/State/Zip/Phone #)
•	
PICK-UP	WAIT MAIL
	
	•
(Bi	usiness Entity Name)
. (De	ocument Number)
•	•
Cartifical Cautions	Contification of Chatter
Certified Copies:	Certificates of Status

Special Instructions of Filing Sifes

OCT - 8 2009

EXAMINER



Office Use Only



200159052092

08/31/09--01040--002 **25.00

08/31/09--01040--001 **100.00

TALLAHASSEE FLORIDA

COVER LETTER

TO:	Registration Division of C					
SUBJI	ECT:	D. & J. F	IAIR	PROD	DUCTS LI	LC
		Name of Limi	ted Liab	ility Con	npany	
The en	closed Articles	of Organization and fee(s) are	submitt	ted for fil	ling.	
Please	return all corres	pondence concerning this mat	ter to th	e follow	ing:	
		D. & J. H			CTS LLC	
			Name	of Person		
		D. & J. H			CTS LLC	
			Firm/C	Company		
		56		erek Av	/e	
			Ad	dress		
				, FL 34		
			-	and Zip C		
-		d_jhairr E-mail address: (to be used	for futur	ts@ya e annual r	hoo.com	n)
For fur	ther information	concerning this matter, pleas	e call:			
		M. GUILLEN	_ at (941	_)	5652688
	Name	of Person		Area Co	ode & Daytime	Telephone Number
Enclos	sed is a check f	or the following amount:				
] \$125.	00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	C	ertified (ling Fee & Copy opy 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		Registr Division Cliftor 2661 F	Courier Addr ration Section on of Corporat n Building Executive Cent assee, FL 3230	ions er Circle



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 1, 2009

JUAN M. GUILLEN 4880 51ST W., UNIT 1801 BRADENTON, FL 34210

SUBJECT: D. & J. HAIR PRODUCTS LLC

Ref. Number: W09000039431

We have received your document for D. & J. HAIR PRODUCTS LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please specify if the individuals listed under Article IV are managers or managing members.,

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) 245-6967.

Letter Number: 109A00029305

Leslie Sellers Regulatory Specialist II

Division of Comparations - P.O. ROY 6327 Tallahassaa, Florida 32314



September 23, 2009

JUAN M. GUILLEN 4880 51ST W., UNIT 1801 BRADENTON, FL 34210

SUBJECT: D. & J. HAIR PRODUCTS LLC

Ref. Number: W09000039431

We have received your document for D. & J. HAIR PRODUCTS LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The 2nd page of the Articles of Organization must be completed and submitted with the first page to be filed. Enclosed is a blank page for you to complete.

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) 245-6967.

Leslie Sellers Regulatory Specialist II

Letter Number: 009A00031162

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

September 29, 2009 Juan M. GUILLEN

D & J HAIR PRODUCTS LLC

Ref. Number: W09000039431

5694 DEREK AVE SARASOTA, FL. 34233

On 08/25/2009 we opened the above LLC. Later on, we received a letter were You asked for some corrections. We corrected and sent it back. But look like you never got that letter; or the letters were crossing on the mail Here we are sending back the package because we changed our business location too The new business location is as above.

The last one was: 4880 51st St W Unit 1801

Bradenton, FL. 34210

Thank you in advance for your help in this mater

Cordially,

Juan M. GUILLEN

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Na		. •	
The name of the L	Limited Liability Comp	pany is:	
	D 0 1 11AID	DECENICATE LL C	
(M		R PRODUCTS LLC ited Liability Company," "L.L.C.," or "LLC)
ARTICLE II - A The mailing addre		of the principal office of the Limi	ted Liability Company is:
Principal Office	Address:	Mailing Address:	
5694 Derek Ave)	5694 Derek Ave	
Sarasota, FL 34	233	Sarasota, FL 34233	
The name and the	Diana	of the registered agent are: Mabel GUILLEN Name st St. W. Unit 1801	
		ress (P.O. Box NOT acceptable)	
	Bradenton, FL 3	34210 _{FL}	
	City	y, State, and Zip	
liability compo registered agent o statutes relating	any at the place design and agree to act in this to the proper and com	t and to accept service of process fo ated in this certificate, I hereby acc capacity. I further agree to compl aplete performance of my duties, an as registered agent as provided fo	cept the appointment as ly with the provisions of all nd I am 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:

"M($\pm R$ " $\equiv Man'$	ager	Name and Address:		
"MGR" = Mana "MGRM" = Ma	anaging Member			
MGR		Diana Mabel GUILLEN		•
		4880 51st St. W. Unit 1801		
		Bradenton, FL 34210		
MGRM		Juan M. GUILLEN		
		4880.51st St. W. Unit 1801		
MGRM		Dario ARANA		
		4880 51st St. W. Unit 1801		
		Bradenton, FL 34210		
(Use attachmen	nt if necessary)	 		
`	• /	e date of filing: 08/25/2009 (C		JA:
LE V: Effective	e date, if other than the listed, the date must b	e date of filing: 08/25/2009 . (C		
LE V: Effective fective date is leading after the	e date, if other than the listed, the date must b date of filing.)			
LE V: Effective	e date, if other than the listed, the date must be date of filing.)	be specific and cannot be more than five bus		
LE V: Effective fective date is leading after the	e date, if other than the listed, the date must be date of filing.) SIGNATURE:	be specific and cannot be more than five bus		
LE V: Effective fective date is leading after the	e date, if other than the listed, the date must be date of filing.) SIGNATURE:	be specific and cannot be more than five bus		
LE V: Effective fective date is leading after the	e date, if other than the listed, the date must be date of filing.) SIGNATURE: Signature of a member of this document const	be specific and cannot be more than five buse. Determine the second of		
LE V: Effective fective date is leading after the	e date, if other than the listed, the date must be date of filing.) SIGNATURE: ** Signature of a member (In accordance with see	be specific and cannot be more than five buse the specific and cannot be more than five buse of a member. Der or an authorized representative of a member. Description of the specific accordance to the specifi		
LE V: Effective ffective date is leading after the control of the	e date, if other than the listed, the date must be date of filing.) FIGNATURE: Signature of a memb (In accordance with see of this document consthat the facts stated here.)	be specific and cannot be more than five buse. Determine the second of		
LE V: Effective fective date is leading after the	e date, if other than the listed, the date must be date of filing.) FIGNATURE: Signature of a memb (In accordance with see of this document consthat the facts stated here.)	be specific and cannot be more than five buse between or an authorized representative of a member. ection 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury erein are true.) Juan M. GUILLEN	siness d	lay:
LE V: Effective flective date is leading after the control of the filling Fee	e date, if other than the listed, the date must be date of filing.) IGNATURE: Signature of a memb (In accordance with see of this document constitute the facts stated here:	be specific and cannot be more than five buse of an authorized representative of a member. ection 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury erein are true.) Juan M. GUILLEN yped or printed name of signee	siness d	lay:
LE V: Effective flective date is I days after the GREOUIRED S Filling Fee \$125.00 Filling	e date, if other than the listed, the date must be date of filing.) IGNATURE: Signature of a memb (In accordance with see of this document constitute the facts stated here:	be specific and cannot be more than five buse between or an authorized representative of a member. ection 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury erein are true.) Juan M. GUILLEN	siness d	