## L10000019120

Obay Armstrong (Requestor's Name)		
The Proformance Shave UC		
12472 Lake Underhill Rd \$209		
Ovlando 7 32828 (City/State/ZIp/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

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02/17/10--01017--020 \*\*160.00



S. HAWKES
FEB 1 8 2010
EXAMINER

## **COVER LETTER**

TO: Registration Section Division of Corporations	
	MANCE SHAVE LLC.
Name of I.	imited Liability Company
13	annot showly company
The enclosed Articles of Organization and fee(s)	are submitted for filing.
Please returnall correspondence concerning this	matter to the following:
BAY ARMITRO	n 6
75	Name of Person
\	
THE PERFORMANCE	Sugar 110
THE TENTORY ANCE	Firm/Company
\	· • · · · · · · · · · · · · · · ·
121120 1	11/ 21#200
12472 LAKE	UhoenHILL Rd #209
	Address
0	
ORLANDO, FLORI	10A 32828
′ X	City/State and Zip Code
CUSTOMESCARE OTH	PET FARMA LIECHAUS COUL
E-mail address: (to be u	PERFORMANCESHAVE. COM see for future annual report notification)
For further information concerning this matter, pl	ease call:
(1)	
May Dan Sian	at 407 281-0135
Name of Person	at (407) 281-0135 Area Code & Daytime Telephone Number
/	
Employed in a short for the feet of the single state of the single	
Enclosed is a check for the following amount	<b>\</b>
\$125.00 Filing Fee \$\infty\$130.00 Filing Fee	&\$155.00 Filing Fee &\$160.00 Filing Fee,
Certificate of Status	Certified Copy Certificate of Status &
	(additional copy is enclosed) Certified Copy
	(additional copy is enclosed)
/	
Mailing Address	Street/Courier Address
Registration Section	Registration Section
/ Division of Corporation	
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	
	Tallahassee, FL 32301

## 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>Title:</u> "MGR" = Manager	Name and Address:
	"MGRM" = Managing Member  Menager	OBAY AZMITZONS 614 FERN LAKE DRIVE ORLANDO, FLORIDA 32825
		FILED ANIII
(If an e	(Use attachment if necessary)  CLE V: Effective date, if other than the date affective date is listed, the date must be spoon days after the date of filing.)	te of filing: 2/10/2016 (OPTIONAL)  pecific and cannot be more than five business days prior
	REQUIRED SIGNATURE:	r an authorized representative of a member.
	of this document constitute that the facts stated herein	n 608.408(3), Florida Statutes, the execution ses an affirmation under the penalties of perjury are true.)    Market   M

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)