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EXAMINER

2010 MAR 15 PM 2: 06 SECRETARY OF STATE SECRETARY OF STATE

COVER LETTER

Di	vision of Co						
SUBJECT:	Beyoutit	ful You LLC					
		Name of Limite	ed Liability Con	mpany			
The enclose	d Articles o	f Organization and fee(s) are s	submitted for fi	ling.			
Please retur	n all corresp	ondence concerning this matt	er to the follow	ring:			
She	ernice N. N	<i>l</i> athis					
			Name of Person				
Bey	outiful Yo	u LLC			· · · · · · · · · · · · · · · · · · ·		
			Firm/Company				
286	8 West Co	ommunity Dr.					
			Address				
Jup	iter, FL 33						
		City	y/State and Zip C	Code			
she	rnicem@g	mail.com E-mail address: (to be used f	or future annual	report notification	nn)		_
For further	information	concerning this matter, please		iopori nominame	,		
Shernice N. Mathis		_ at (_561	₎ 301-42				
	Name	of Person	Area (Code & Daytime	Telephone Number		
Enclosed i	s a check fo	or the following amount:			□ \$160.00 FiŊ	2010 MA Secre	وسوست
□\$125.00 F	Filing Fee	☑\$130.00 Filing Fee & Certificate of Status	S155.00 F Certified (additional	_	Certificate (1) Certified (2) (additional cur	f Status &	
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Regis Divis Clifto 2661	t/Courier Additration Section ion of Corporation Building Executive Cennassee, FL 323	ress D tions ter Circle	<u>6</u> 6	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:			
Beyoutiful You LLC			
(Must end with the words "Limited Liability	y Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street address of the prin	ncipal office of the Limited Liability C	Compar	ıy is:
Principal Office Address:	Mailing Address:		
2868 West Community Dr.	2868 West Community Dr.	_	
Jupiter, FL 33458	Jupiter, FL 33458	<u>-</u>	
Jupiter,	gistered agent are: Agent. You must designate an individual or an SECRETARY OF	other 21	TILEO

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I 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)

Page 1 of 2

The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member **MGRM** Shernice N. Mathis 2868 West Community Dr. Jupiter, Fl. 33458 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: March 10, 2010 (If an effective date is listed, the date must be specific and cannot be more than five basiness mays prior 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.) Shemice N. Mathis Typed or printed name of signee Filing Fees:

ARTICLE IV- Manager(s) or Managing Member(s):

\$125.00 Filing Fee for Articles of Organization and Designation

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