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EXAMINER

LIMITED LIABILITY COMPANY

OF

LMJR BARBER SCHOOL LLC

I, JULIE RIVERA, hereby establish LMJR BARBER SCHOOL LLC for the purpose of becoming a Limited Liability Company under the laws of the State of Florida, providing for the formation, liability, rights, privileges and immunities of a Limited Liability Company.

ARTICLE I

The name and address of the Limited Liability Company shall be:

LMJR BARBER SCHOOL LLC

ARTICLE II

The Company is organized for any legal and lawful purpose for which a limited liability company may be organized pursuant to the Act.

ARTICLE III

The initial street address of the Limited Liability Company' principal office is: 6628 STIRLING ROAD DAVIE FLORIDA 33024

ARTICLE IV

MANAGING MEMBER

The name and address of the managing member is as follows:

Title: MANAGING MEMBER

.

Name: JULIE RIVERA

Address: 6628 Stirling Road

Davie, FL 33024

JULIE RIVERA

ARTICLE V

The name and address of the Registered Agent is:

CHARLES J GOLDMAN 601 South Federal Highway Hollywood, FL 33020

Having been named as registered agent and to accept services 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 property 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, Florida Statutes.

REGISTERED AGENT

STATE OF FLORIDA)
SS:
COUNTY OF BROWARD)

BEFORE ME, this 28 day of , 2011, personally appeared JULIE RIVERA, who is personally known to me or who has produced her Driver's License as identification and is the person described in the foregoing Limited Liability Company of LMJR BARBER SCHOOL LLC and she acknowledged before me that she executed the same for the purposes therein expressed.

CHARLESS, QOLDMAN

ROSA RY MY COMMISSION & BOUT PETTE F

EXPIRES, Lily 4, 2012

F DAndiss Rnu Notify Public Underwriters

Type or print name of notary

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SEGRETARY OF STATE
TALLAHASSEF PLEGITA.