## L12000068619

(Re	equestor's Name)			
(Address)				
(Address)				
(Ci	ity/State/Zip/Phone	e #)		
PłCK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	s of Status		
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SECRETARY OF SIMILED SINGLES OF CORPORAGE SIMILED SINGLES OF CORPORAGE SIMILED SINGLES OF CORPORAGE SIMILED SI

MAY 2 2 2012 T. HAMPTON

## **COVER LETTER**

	TO:	Registration of	on Section Corporations		
		mai	keun-hy-marilyn	llc	
SUBJECT: makeup-by-marilyn llc  Name of Limited Liability Company					
	The en	closed Article	es of Organization and fee(s) are	e submitted for filing.	
	Please	return all corr	respondence concerning this ma	atter to the following:	
		<u>marilyr</u>	n amato		
				Name of Person	
		makeu	ıp-by-marilyn		
				Firm/Company	
	833 nw 82nd lane				
	Address				
	k	oca rato	n florida 33487	City/State and Zip Code	
		marilyna	mato@yahoo.com	ny/state and Zip Code	
	•			for future annual report notification)	
	For fur	ther informati	ion concerning this matter, plea	se call:	
marilyn amato		o	at (315 ) 243-3040		
		Na	me of Person	Area Code & Daytime Telephone Number	
	Enclos	sed is a check	k for the following amount:		
	\$125.00	Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & \$160.00 Filing Fee, Certified Copy 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 Liability Company	is:
makeup-by-marilyn llc	
(Must end with the words "Limited Li	ability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
833 nw 82nd lane	833 nw 82nd lane
boca raton florida 33487	boca raton florida 33487
	red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another ne registered agent are:
marilyn amato	
Na	me
833 nw 82nd l	ane
Florida street	address (P.O. Box NOT acceptable)
boca raton	<sub>FL</sub> 33487
City	, State, and Zip
liability company at the place designated i	to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as icity. I further agree to comply with the provisions of all

liability company at the place designated in this certificate, I hereby accept the appointment as egistered 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 (REOUIRED

(CONTINUED)

Page 1 of 2

SECRETARY OF SIMILERS
DIVISION OF CORPORAGE IN 11: 0.3

## 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	
mgr	mgr	marilyn amato
		833 nw 82nd lane boca raton florida 33487
	the transformation has been all the second of the anti-contract of the property of the second of the	gramma and the state of the sta
	(Use attachment if necessary)	
ARTI(	CLE V: Effective date, if other than the d	ate of filing: (OPTIONAL)
•	effective date is listed, the date must be s O days after the date of filing.)	specific and cannot be more than five business days prior
	REQUIRED SIGNATURE:	A 1
	mauly	anot-
	Signatur∉ of a member of	or an authorized representative of a member.
	constitutes an affirmation under the	08(3), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true. tion submitted in a document to the Department of State is provided for in s.817.155, F.S.)
	marilyn amato	, <del>m</del>
	Туре	d or printed name of signec

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)