

07/10/2012 1:31:08 PM -0400 POWERED BY PROCAFAX PAGE 003  
#L12000089738

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H12000178494 3)))



H120001784943ABC3

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : HUBCO  
Account Number : 104662003400  
Phone : (516) 935-3940  
Fax Number : (516) 935-3088

FILED  
12 JUL 10 AM 8:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: andrewguilfoil5@hotmail.com

RECEIVED  
12 JUL 10 PM 1:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FLORIDA LIMITED LIABILITY CO.  
B Andrew Skin Care, LLC**

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

K. SALY  
EXAMINER

JUL 11 2012

H12000178494

ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: **B Andrew Skin Care, LLC**

ARTICLE II - Address

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

470 3rd Street South, Suite 102

Saint Petersburg, FL 33701

Mailing Address:

470 3rd Street South, Suite 102

Saint Petersburg, FL 33701

FILED  
12 JUL 10 AM 8:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature

The name and Florida street address of the registered agent are:

John Andrew Guilfoil IV

Name

492 6th Avenue N.

(P.O. Box or Mail Drop Box NOT Acceptable)

Saint Petersburg, FL 33701

(City / State / Zip)

*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 - John Andrew Guilfoil IV

H12000178494

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

The name and address of each Manager or Managing Member is as follows:

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGRM

John Andrew Guilfoill IV - 492 8th Avenue N., Saint Petersburg, FL 33701

MGRM

Brett Adrian Crandal - 492 8th Avenue N., Saint Petersburg, FL 33701

(Use attachment if necessary)

**REQUIRED SIGNATURE:**

  
Signature of a member or 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.)

John Andrew Guilfoill IV

Typed or printed name of signee