

L12 000135380

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

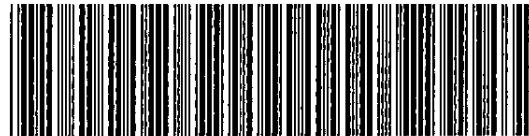
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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07/30/12--01018--018 **155.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2012 OCT 23 PM 1:43

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T. CLINE

OCT 24 2012

EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 31, 2012

VIRGINIA HINES
1255 SW 101 TER BLD 10 #109
PEMBROKE PINES, FL 33025

SUBJECT: SUSIE SANDHAIR & MAKEUP "LLC"
Ref. Number: W12000040090

We have received your document for SUSIE SANDHAIR & MAKEUP "LLC" and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The converting Florida entity must be active on our records.

If you still want to file the LLC we will need a letter stating you are not going to reinstate the corporation.,

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammi Cline
Regulatory Specialist II

Letter Number: 712A00019962

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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SUSIE SANDHAIR & MAKEUP "LLC".

(Name of Resulting Florida Limited Company)

The enclosed Certificate of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 608.439, F.S.

Please return all correspondence concerning this matter to:

VIRGINIA HINES

(Contact Person)

FIVE STARS MULTISERVICES

(Firm/Company)

1255 SW 101 TER BLD 10 #109

(Address)

PEMBROKE PINE FLORIDA 33025

(City, State and Zip Code)

fivestarsmultiservices@gmail.com

E-mail address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

VIRGINIA HINES at (954) 709-8775

(Name of Contact Person)

(Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$150.00 Filing Fees
(\$25 for Conversion
& \$125 for Articles
of Organization)

☒ \$155.00 Filing Fees
and Certificate of
Status

☐ \$180.00 Filing Fees
and Certified Copy

☐ \$185.00 Filing Fees,
Certified Copy, and
Certificate of Status

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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TALLAHASSEE, FLORIDA

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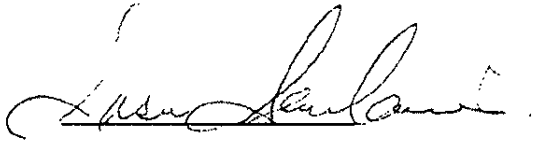
08-03-2012

To: Registration Section

Divisions Of Corporation:

I Susie Sandaire, will not be reinstating Susie Sandhair &
MakeUp, Inc.

Document Number P10000078237

A handwritten signature in cursive script, appearing to read "Susie Sandaire", written over a horizontal line.

Susie Sandaire

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SUSIE SANDHAIR & MAKEUP "LLC."

(Must end with the words "Limited Liability Company, the abbreviation "L.L.C.," or the designation "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:

12204 MIRAMAR PK WAY

12204 MIRAMAR PK. WAY

MIRAMAR FLORIDA 33027

MIRAMAR FLORIDA 33027

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

SUSIE SANDAIRE

Name

12204 MIRAMR PK. WAY

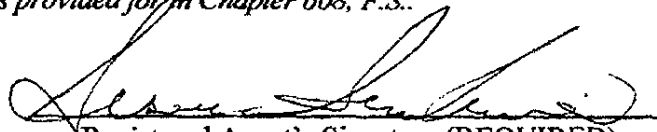
Florida street address (P.O. Box NOT acceptable)

MIRAMAR

FL 33025

City, State, and 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 (REQUIRED)

(CONTINUED)

Page 1 of 2

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TALLAHASSEE, FLORIDA

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

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

Title:

Name and Address:

"MGR" = Manager

"MGRM" = Managing Member

"MGR"

SUSIE SANDAIRE

12204 MIRAMAR PK WAY

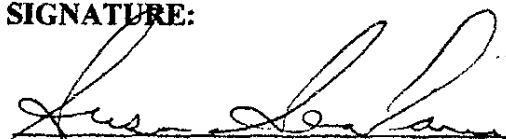
MIRAMAR FLORIDA 33027

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____
(OPTIONAL)

(The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Certificate of Conversion, if an effective date listed therein.)

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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

SUSIE SANDAIRE

Typed or printed name of signee

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