

# L130000088983

Florida Department of State  
Division of Corporations  
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To:

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

From:

Account Name : EMPIRE CORPORATE KIT COMPANY  
Account Number : 072450003255  
Phone : (305) 634-3694  
Fax Number : (305) 633-9696

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

Email Address: \_\_\_\_\_

**FLORIDA LIMITED LIABILITY CO.  
DIVINE LASHES, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

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TALLAHASSEE, FLORIDA

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JUN 20 2013

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ARTICLES OF ORGANIZATION  
OF  
DIVINE LASHES, LLC

The undersigned authorized representative of a member, for the purpose of forming a limited liability company under the Florida Limited Liability Act, F.S. Chapter 608, hereby makes, acknowledges, and files the following Articles of Organization.

2013 JAN 19 PM 12:00  
FILED  
STATE  
OFFICE  
TALLAHASSEE, FLORIDA

ARTICLE I.

The name of the limited liability company shall be:

DIVINE LASHES, LLC

ARTICLE II.

The company may engage in any or all lawful business permitted under the laws of the State of Florida.

ARTICLE III.

The street address of the company's initial registered office and principal place of business shall be 7461 Northwest 4<sup>th</sup> Street, Plantation, Florida 33317. The name of the company's initial registered agent at this address shall be Susana Cuculiza. The principal place of business is 7461 Northwest 4<sup>th</sup> Street, Plantation, Florida 33317.

McCLEARY & REINSTEIN, PA  
7461 Northwest 4th Street  
Plantation, Florida 33317-2216

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ARTICLE IV.

This Company shall be managed by the Manager in accordance with the Company's Operating Agreement. The name of the Manager of the Company is:

Manager/Member: Susana Cuculiza


EXECUTION

Being the sole authorized representative of a member, I hereby execute these Articles of Organization.

  
Susana Cuculiza

ACKNOWLEDGMENT

In witness whereof, I hereunto set me hand and seal this 18<sup>th</sup> day of June, 2013.

  
Susana Cuculiza

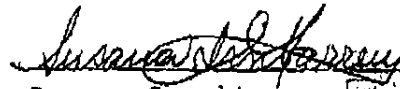
2013 JUN 19 AM 12:06  
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TALLAHASSEE, FL 32310-1111

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ACCEPTANCE OF DESIGNATION

Having been named to accept service of process for the above stated company as specified in ARTICLE III., I hereby agree to act in this capacity.

  
Susana Cuculiza

2013 JUN 19 AM 12:08  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

FILED

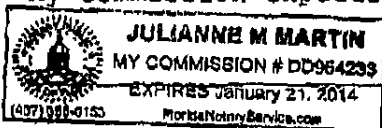
State of Florida)  
County of Broward)

I hereby certify on this 18<sup>th</sup> day of June, 2013, personally appeared before the undersigned authority, Susana Cuculiza to me well known, or who has produced identification in the nature of \_\_\_\_\_ and who executed, acknowledged and accepted the designation in these Articles of Incorporation, and acknowledged before me that they executed the same.

Witness my hand and seal in the County and State aforesaid on the above date.

  
Notary Public

My commission expires:



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