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AUG 0 5 2013

D. BRUCE

COVER LETTER

TO:

Registration Section **Division of Corporations**

Primetime Esthetics, LLC.

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Christine E. Alexander Name of Person Primetime Esthetics, LLC. Firm/Company P.O. Box 1581 Address Pinellas Park, Florida 33780 City/State and Zip Code Lmt.alexander@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:

Christine E. Alexander Area Code & Daytime Telephone Number Name of Person

Enclosed is a check for the following amount:

□\$125.00 Filing Fee

□\$130.00 Filing Fee & Certificate of Status

□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ■ \$160.00 Filing Fee, 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

The name of the Limited	Liability Company	is:	
Primetime Esthetics, LLC.			
	with the words "Limited Lia	ability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address			
	=	principal office of the Limited Liab	oility Company is:
			, •
Principal Office Addres	ss:	Mailing Address:	
Christine E. Alexander		Christine E. Alexander	
7001 Central Ave, Suite 3		P. O. Box 1581	
St. Petersburg, FL 33710		Pinetlas Park, FL 33780	
	ine E. Alexander Nan 94th Terrace North		IC -2 TH 2: PL
	Pinellas Park.	33782	(- · · · · · · · · · · · · · · · · · ·
	,	State, and Zip	
liability company at the registered agent and ag all statutes relating to t	he place designated in gree to act in this cap the proper and compl	to accept service of process for the all n this certificate, I hereby accept the active. I further agree to comply with lete performance of my duties, and I registered agent as provided for in Capital REOURED	appointment as the provisions of am familiar with

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

EFFECTIVE DATE 08/01

ARTICLE I - Name:

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Memb	DET
MGR	Christine E. Alexander
	5770 94th Terrace North
	Pinellas Park, FL 33782
(Use attachment if necessary)	
(Use attachment if necessary)	
LE V: Effective date, if other	than the date of filing: August 1, 2013 . (OPTIONA
ffective date is listed, the da	than the date of filing: August 1, 2013 (OPTION). the must be specific and cannot be more than five business.
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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)