

L13000147378

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.

((H13000232366 3)))



H130002323663ABC-

RECEIVED

13 OCT 18 AM 8:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 : FASTKIT CORP
Account Number : I20100000009
Phone : (305) 599-0839
Fax Number : (305) 592-9591

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2013 OCT 18 AM 10:16

FILED

****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.
AMULET OF STYLE LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

OCT 21 2013

D. BRUCE

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION OF
AMULET OF STYLE LLC

The undersigned certify that we have associated ourselves together for the purpose of becoming a limited liability company under the laws of the State of Florida, Florida Statute 608 - Florida Limited Liability Company Act, providing for the formation, rights, privileges, and immunities of limited liability companies for profit. We further declare that the following Articles shall serve as the Charter and authority for the conduct of business of the limited liability company.

ARTICLE I NAME

The name of this Limited Liability Company shall be AMULET OF STYLE LLC (the 'Company').

ARTICLE II PRINCIPAL PLACE OF BUSINESS AND MAIL ADDRESS

The principal place of business and mailing address of this company shall be:

8022 NW 114 Place
Medley, FL 33178

ARTICLE III MANAGEMENT

Management of this limited liability is reserved to its members, whose names and addresses are as follows:

NAMES	ADDRESS
Ximena Lopez Caceres Manager Member	8022 NW 114 Place Medley, FL 33178
Natalia Maria Barros Manager Member	8022 NW 114 Place Medley, FL 33178
David Arturo Llanos Member	8022 NW 114 Place Medley, FL 33178

SECRETARY OF STATE
TALLAHASSEE FLORIDA

2013 OCT 18 AM 10:16

FILED

ARTICLE IV ADMISSION OF ADDITIONAL MEMBERS

The right, if given, of the remaining members to admit additional members and the terms and conditions of the admissions shall be as determined in accordance with the Regulations of the Limited Liability Company.

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida Street address of the initial registered agent is:

Natalia Maria Barros
8022 NW 114 Place
Medley, FL 33178

ACKNOWLEDGMENT:

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.



Natalia Maria Barros

ARTICLE VI MEMBERS' RIGHTS TO CONTINUE BUSINESS

The right, if given, of the remaining members of the Limited Liability Company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the Limited Liability Company shall be as determined in accordance with the Regulations of the Limited Liability Company.

CLERK OF STATE
TALLAHASSEE, FLORIDA

2013 OCT 18 AM 10:16

FILED

ARTICLE VII DURATION

This Limited Liability Company shall exist perpetually until dissolved in a manner provided by law, or as provided in the regulations adopted by the members.

Dated this 18th day of Oct 2013.



Ximena Lopez Caceres
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 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.)

FILED
2013 OCT 18 AM 10:16
CLERK OF STATE
TALLAHASSEE, FLORIDA