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To:

Division of Corporations

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: (850)617-6383

From:

Account Name ; CLARA GIRALDO, P.A.

Account Number : I19990000017

Phone

Fax Number

: (305)485-9300 : (305)485-1098

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

 Addrass:	

FLORIDA LIMITED LIABILITY CO. CREME UP COSMETICS, LLC.

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY OF

CREME UP COSMETICS, LLC.

ARTICLE I - NAME

The name of the Limited Liability Company is:

CREME UP COSMETICS, LLC.

ARTICLE II - ADDRESS

The principal office of the Limited Liability Company is:

18501 NE 23 COURT MIAMI, FL. 33180

The mailing address shall be:

18501 NE 23 COURT MIAMI, FL. 33180

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE:

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

MARIA I, MAZO FRANCO

18501 NE 23 COURT

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

MIAMI, FL. 33180

City, State, and Zip

IS JUN-3 PH 2: 49
PLUMETARY OF STATE
UNABASSEE, FLORIDA

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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 685, F.S.

REGISTERED AGENT'S SIGNATURE

ARTICLE IV- MANAGEMENT

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

MARIA I. MAZO FRANCO 18501 NE 23 COURT MIAMI, FL, 33180 MANAGER

OMAR A. MAZO 18501 NE 23 COURT MIAMI, FL. 33180

MANAGER

(An additional article must be added if an effective date is requested)

Signature of a member or an authorized representative of a member.

(In accordance with section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated hernin are true.)

MARIA I, MAZO FRANCO

Typed or printed name of signee

SEGRETARY OF STATE
ALL ABASSEF, FLORING