# Electronic Articles of Organization For Florida Limited Liability Company

L17000234847 FILED 8:00 AM November 14, 2017 Sec. Of State cmwood

# **Article I**

The name of the Limited Liability Company is:

LUXE MED SPA LLC

#### **Article II**

The street address of the principal office of the Limited Liability Company is:

99 NW 183RD ST 209 MIAMI GARDENS, FL. US 33169

The mailing address of the Limited Liability Company is:

99 NW 183RD ST 209 MIAMI GARDENS, FL. US 33169

#### **Article III**

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

SERGELYN DORCELUS 99 NW 183RD ST 209 MIAMI GARDENS, FL. 33169

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.

Registered Agent Signature: SERGELYN DORCELUS

## **Article IV**

The name and address of person(s) authorized to manage LLC:

Title: MGR SERGELYN DORCELUS 99 NW 183RD ST STE 209 MIAMI GARDENS, FL. 33169 US L17000234847 FILED 8:00 AM November 14, 2017 Sec. Of State cmwood

## **Article V**

The effective date for this Limited Liability Company shall be:

11/13/2017

Signature of member or an authorized representative

Electronic Signature: SERGELYN DORCELUS

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.

# L17000234847

November 30, 2017

Sammy Caldwell
P. O. Box 6327
Tallahassee, FL 32314

Dear Mr. Caldwell,

Per our conversation yesterday, November 30<sup>th</sup>, 2017, my name was used as the registered agent for the following corporations, without my consent.

ICON MEDICAL SPAILLC

L17000206042

16714 SW 39TH ST MIRAMAR, FL 33027

PREMIER MED SPAULC

L17000214211

99 NW 183RD ST STE 209 MIAMI GARDENS, FL 33169

LUXE MED SPALLC

L17000234847

99 NW 183RD ST STE 209 MIAMI GARDENS, FL 33169

Therefore, the owners of said corporations are not in compliance with the requirement to establish that a person appointed or named as an entity's registered agent must have consented, in a written or electronic form, to serve in that capacity.

Furthermore, I am not affiliated with any of the said corporations and would like my name removed as the registered agent.

Thank you,

Sergelyn Dorcelus

STATE OF FLORIDA

COUNTY OF Broad before me, Service personally appeared, Song Lunch Defense personally proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to the within instrument and acknowledged to me that she executed the same in her authorized capacity, and that by her signature on the instrument the person or the entity upon behalf of which the person acted, executed the instrument

WITNESS my hand and official seal

(Notary signature)

My Commission Expires: 07

07/10/2021



VERONICA NOBOA
Notary Public, State of Florida
Commission# GG 124748
My comm. expires July 16, 2021