

2190000033802

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.

((H19000046477 3)))



H190000464773A6C5

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)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.  
Account Number : I20000000019  
Phone : (305)552-5973  
Fax Number : (305)675-5944

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

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

19 FEB -8 PM 5:22  
DIVISION OF CORP. AFFAIRS

FLORIDA LIMITED LIABILITY CO.  
ROUSSE BEAUTY SPA, LLC.

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

C RICO  
FEB 08 2019

**-ARTICLES OF ORGANIZATION FOR LIMITED LIABILITY  
COMPANY  
OF  
ROUSSE BEAUTY SPA, LLC.**

**ARTICLE I - Name**

The name of the Limited Liability Company is:

**ROUSSE BEAUTY SPA, LLC**

**ARTICLE II - Address**

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

**5050 BISCAYNE BLVD  
MIAMI, FL 33137**

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

The Name and the Florida street address of the Registered Agent are:

**JUAN CARLOS FORERO  
311 SW 78<sup>TH</sup> AVENUE  
NORTH LAUDERDALE, FL 33068**

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 familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

  
Registered Agent's Signature

**ARTICLE IV - Management (Check box if applicable)**

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

**ERIKA B. SUAREZ COLMENAREZ  
AMBR (50%)  
999 SW FIRST AVENUE  
MIAMI, FL 33130**

  
ERIKA B. SUAREZ COLMENAREZ

**JUAN CARLOS FORERO  
AMBR (50%)  
311 SW 78<sup>TH</sup> AVENUE  
NORTH LAUDERDALE, FL 33068**

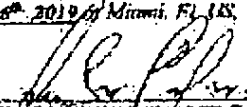
  
JUAN CARLOS FORERO

19 FEB - 8 PM 5:22

STATE  
OFFICE OF COMMERCE

(In accordance with section 605.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

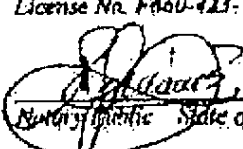
IN WITNESS WHEREOF, the undersigned has hereunto set their hands and seal this Feb 6<sup>th</sup>, 2019 at Miami, FL 331.

  
ERIKA BERENICE SUAREZ COLMENAREZ

  
JUAN CARLOS FORERO

STATE OF FLORIDA  
COUNTY OF DADE

Sworn and subscribed before me, this 6<sup>th</sup> of February of 2019, at Miami, FL, by Mrs. Erika Berenice Suarez Colmenarez and Mr. Juan Carlos Forero, who are known to me and presented their Florida Driver License No. S624-202-89-675-0 and Florida Driver License No. F460-423-73-321-1 respectively for identification.

  
Notary Public, State of Florida



Commission Expires