

LA99017817

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : SUPERBIZ.COM, INC.
Account Number : I20070000160
Phone : (800) 494-3124
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****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.
BEAUTY AND YOUR BROWS LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
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SECRETARY OF STATE
TALLAHASSEE, FL

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J. FASON

JUL 19 2019

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**ARTICLES OF ORGANIZATION FOR A
FLORIDA LIMITED LIABILITY COMPANY****ARTICLE I NAME**

The name of the Limited Liability Company is:

BEAUTY AND YOUR BROWS LLC

ARTICLE II ADDRESS

The principal address of the Limited Liability Company is:

313 SW ALBANY AVENUE
STUART, FLORIDA 34994

The mailing address of the Limited Liability Company is:

4657 SW WADE DRIVE
PORT ST LUCIE, FLORIDA 34953**ARTICLE III REGISTERED AGENT**

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

AMANDA DEBERARDINIS
4657 SW WADE DRIVE
PORT ST LUCIE, FLORIDA 34953

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 605, F.S.

X /s/ Amanda DeBerardinis

AMANDA DEBERARDINIS / Registered Agent's signature

CLERK OF STATE
FLORIDA

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ARTICLE IV . AUTHORIZED PERSON(S)

The name and address of each person authorized to manage and control the Limited Liability Company:

AUTHORIZED MEMBER
AMANDA DEBERARDINIS
4657 SW WADE DRIVE
PORT ST LUCIE, FLORIDA 34953

.....

X /s/ Amanda DeBerardinis

AMANDA DEBERARDINIS / Authorized Representative's signature

(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 herein 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.)