

L1900028488Florida Department of State
Division of Corporations
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Division of Corporations
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Email Address: _____

FLORIDA LIMITED LIABILITY CO.
CDR BEAUTY LABS, LLC

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

2019 SEP 23 AM 11:13
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

CDR BEAUTY LABS, LLC

(Must contain the words "Limited Liability Company, "LLC," or "L.L.C.")

ARTICLE II - Address:

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

Principal Office Address:

2840 NW 108 AVE

DORAL, FL 33172

Mailing Address:

SAME

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

RICARDO RAHME

Name

2840 NW 108 AVE

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

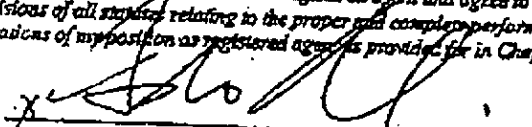
DORAL, FL 33172

City

State

Zip

Having been named as registered agent and to accept service of process for the above named 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.


Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV.

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

Title:
"AMBR" = Authorized Member
"MGR" = Manager
AMBR

Name and Address

RICARDO RAHME

2840 NW 108 AVE

DORAL FL 33172

AMBR

LUZ ANGELA GUARDIOLA

2840 NW 108 AVE

DORAL FL 33172

AMBR

DERIVALDO ALVES DOS ANJOS

2840 NW 108 AVE

DORAL FL 33172

AMBR

CESAR GOULARTE

2840 NW 108 AVE

DORAL FL 33172

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing. (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be used as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE

Signature of a member or an authorized representative of a member.
This document is executed in accordance with section 605.0210 (1) (b), Florida Statute.
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.317.155, F.S.

RICARDO RAHME

Typed or printed name of signer