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SECRETARY OF STATE DIVISION OF CORPORATIONS

COVER LETTER

TO: New Filing Sec Division of Cor			
SUBJECT: DUT	e Beauty Name of Lim	by Russia ited Lability Company	LLC
The enclosed Articles of	Organization and fee(s) are	submitted for filing.	
Please return all correspo	indence concerning this mai	tter to the following:	
	DarRussia	Junes - Ba	rrow
	Pure B	Pauly by K	Russia LLC
1010 R	asin St #	1201 Address	
	allahasse	Q F 33304 ity/State and Zip Code	1
	ifrarellal	ity/State and Zip Code ONUS © GMOU for future annual report notificati	
For further information co	acerning this matter, please	call:	
DURUS	SIA JUUS at (e of Person Belliow Ar	850) 699 / rea Code Daytime Telephon	209 e Number
Enclosed is a check for the	ne following amount:	,	
□\$125,00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	El\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Atailia	a Addrose	Stroot Addroce	

Mailing Address

New Filing Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

PUYE BEAUTY BY RUSSIA LLC
(Must conatin the words "Limited Liability Jompany, "L.L.J.," 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:

Nailing Address:

1010 Basin St 1010 Basin St

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:

Day Russia Jones - Barrow

1010 Basin St A201

Florida street address (P.O. Box <u>NOT</u> acceptable)

City State

Zin

Taving 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 proyided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED

(CONTINUED)

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SECRETARY OF STATE

ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:		
"MGR" = Manager	Darkussia Jones - Barrow 10 10 Basin Si Azot tallahassee 1/ 3230L		
If an effective date is listed, the date must he date of filing.)	be specific and cannot be more than five business days prior to or 90 days after s not meet the applicable statutory filing requirements, this date will not be listed as tment of State's records.		
ARTICLE VI: Other provisions, if any.			
This document is I am aware that ar	examember or an authorized representative of a member. executed in accordance with section 605.0203 (1) (b). Florida Statutes, by false information submitted in a document to the Department of State degree felony as provided for in s.817.155. F.S.		
	Darkussia Jones - Barron Segre		

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)