

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : FASTKIT CORP

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Phone : (305)599-0839

Fax Number

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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. NATHY MAKEUP ART LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

Electronic Filing Menu Corporate Filing Menu

Help

	ARTICLES OF ORGANIZATION FOR FLORIDA LIN	MTHED LIABILITY COMPANY
ARTICLE I -	Name:	
	Limited Liability Company is:	,
NAT	THY MAKEUP ART LLC	
	(Must contain the words "Limited Liability Corr	npany, "L.L.C.," or "LLC.")
ARTICLE II -		•.
The mailing add	ress and street address of the principal office of the L	imited Liability Company is:
	Principal Office Address:	Mailing Address:
1133	7 NW 55 LN	
DOR	AL, FL 33178	
(The Limited Li	Registered Agent, Registered Office, & Registered ability Company cannot serve as its own Registered A centity with an active Florida registration.)	d Agent's Signature: gent. You must designate an individual or

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

NATHALIA GARO	CIA	
	Name	
11337 NW 55 LN		
Florida street addre	ss (P.O. Box <u>NOT</u> a	cceptable)
DORAL	FL	33178
City	State	Zip

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 company. further agree to comply with the provisions of all statutes relating to the proper and complete performance of my circles and I am familiar with and accept the obligations of my posttion as registered agent as provided for in Chapter 605, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	KEUP ART LLC	<u></u>	
(Mu	ist contain the words "Limit	ed Liability Company,	"L.L.C.," or "LLC.")
ARTICLE II - Address:			
	street address of the principa	al office of the Timite i	There is a
	and addition of the principa	n o'lice of the Pillitée	LIBOILITY Company IS:
r	rincipal Office Address:		Mailing Address:
1 4 6 6 6 7 7 7 7 7 7	7		
	1.5		
11337 NW 55			
DORAL, FL 3			
DORAL, FL 3	3178 ed Agent, Registered Offik	e, & Registered Agent	nt's Signature:
DORAL, FL 3 LRTICLE III - Register The Limited Liability Conother business entity w	ed Agent, Registered Office impany cannot serve as its o ith an active Florida registra street address of the registe	wn Registered Agent. tion.) red agent are:	nt's Signature: You must designate an individual or
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(CONTINUED)

Title: AMBR" = Authorized Member	Name and Address:
MGR" = Manager	
MGR	NATHALIA GARCIA 11337 NW 55 LN
	DORAL, FL 33178
	
V: Effective date, if other than t	the date of filing: (OPTIONAL)
EV: Effective date, if other than to clive date is listed, the date mus filling.) the date inserted in this block does nent's effective date on the Depa	es not meet the applicable statutory filing requirements, this date will not be
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