To: +18506176381

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : DOCUMENT PLANET INC

Account Number: I20180000095 Phone : (305)510-3848 Fax Number : (786)789-2416

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

INFO@DOCUMENTPLANETING.COM Email Address:

# FLORIDA LIMITED LIABILITY CO. BEAUTIFUL YOU BY MARIA ATENCIO

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## H200003553293

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I - Name:

The name of the Limited Liability Company is:

### BEAUTIFUL YOU BY MARIA ATENCIO LLC

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

## ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
8001 W 36 STREET #6	8001 W 36 STREET #6
HIALEAH GARDENS, FL 33018	HIALEAH GARDENS FL 33018

## 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:

DOCUMENT PLAN	ET INC	
	Name	
4167 NW 135 STRE	ET	
Florida street addres	s (P.O. Box <u><b>NOT</b></u> ac	cceptable)
OPA ŁOCKA	FL	33054
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 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.

Onservina Pou

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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# H20000355329 3

Title:	Name and Address:
"AMBR" = Authorized Mer "MGR" = Manager	nber
MGR	MARIA ATENÇIO
**************************************	8001 W 36 STREET # 6 HIALEAH GARDENS, FL 33018
	HIALEAR GARDENS, FL 33018
**************************************	
	**************************************
(Use attachment if necessary	,
LEV: Effective date, if other fective date is listed, the date of filing.) If the date inserted in this blooment's effective date on the LEVI: Other provisions, if an	than the date of filing: (OPTIONAL)  must be specific and cannot be more than five business days prior to or 90  k does not meet the applicable statutory filing requirements, this date will not Department of State's records.
LEV: Effective date, if other fective date is listed, the date of filing.) If the date inserted in this blooment's effective date on the LEVI: Other provisions, if an	than the date of filing:
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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)