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21 JUN 22 PHIO: 29

SB 6/25/2

COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: BEL Because Bear Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Danalov Frederique Name of Person
Name of Person
Bèl Beauty Bar Firm/Company
Firm/Company
1807 Tennyson St.
Address
Orlando, Fl 32809 City/State and Zip Code
danalov frederique agmail.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Danalov Frederique at (407) 222-4142 Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount:
□\$125.00 Filing Fee □\$130.00 Filing Fee & □\$155.00 Filing Fee & □\$160.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)

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

ARTICLE I - Name: The name of the Limited Liability Co	ompany is:			
(Must contain t	Bél Beauty the words "Limited Liability C	Bar L.L.C.	_LC.")	
ARTICLE II - Address: The mailing address and street addre	ess of the principal office of the	Limited Liability Com	pany is:	
<u>Principal O</u>	office Address:	<u>Ma</u>	iling Address:	
1807 Tennyson orlando, Fl 32	5t, 809	7807 Tenny	san st. 1 32809	_ _ _
ARTICLE III - Registered Agent, (The Limited Liability Company can another business entity with an activ	not serve as its own Registered	red Agent's Signature Agent. You must desig	: gnate an individual or	
The name and the Florida street addr	ess of the registered agent are:			
_	Danalov Frederi	que		
	780'7 Tenny50n Florida street address (P.O. Bo			
	Orlando F City State	1 3280 Zip)9	
Having been named as registered agen place designated in this certificate. I he further agree to comply with the provis am familiar with and accept the obliga	erehy accept the appointment a sions of all statutes relating to it ations of my position as register	registered agent and age c proper and complete d agent as provided for Signature (REQUIRE	gree to act in this capaci, performance of my dutic. in Chapter 605, F.S	ity. 1 sr, and 1 SE 2

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

"AMBR" = Authorized Member		
"MGR" = Manager		
Manager_	Danaloy Frederique 7807 Tenny 50n° St. Orlando, Fl 32809	
Manager	Dajlah Davis 5305 Flying Eagle Kissimmer, Fl 34746	
		
(Use attachment if necessary)		
he date of filing.)	be specific and cannot be more than five business days prior to or 90 days af	
he date of filing.) Note: If the date inserted in this block does the document's effective date on the Departs	not meet the applicable statutory filing requirements, this date will not be listen	
he date of filing.) Note: If the date inserted in this block does the document's effective date on the Department.	not meet the applicable statutory filing requirements, this date will not be listen	
the date of filing.) Note: If the date inserted in this block does the document's effective date on the Departs ARTICLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of This document is eliam aware that any	not meet the applicable statutory filing requirements, this date will not be listed ment of State's records. A member of an authorized representative of a member. Executed in accordance with section 605.0203 (1) (b). Florida Statutes, y false information submitted in a document to the Department of State	
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