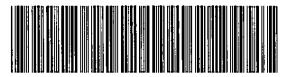
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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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(Document Number)
Certified Copies Certificates of Status
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Special Instructions to Filing Officer:





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W21-104193



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 23, 2021

PATRICIA HARTFIELD YOU-NIQUE BODY SPA 4651 BABCOCK ST NE UNIT 18 #324 PALM BAY, FL 32905

SUBJECT: YOU-NIQUE BODY SPA, LLC

Ref. Number: W21000104193

hathorizer

We have received your document for YOU-NIQUE BODY SPA, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

<u>Please complete Article IV.</u> Most financial instituions require that the person opening an account be listed in this section as a authorized member or manager.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

DANIEL L O'KEEFE Regulatory Specialist II

Letter Number: 921A00017132

2021 July 23 PHID: 15

:.: :11

www.sunbiz.org

COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: Du-Nique Body Spanny
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Patricia Hart Field Name of Person
You-Nigue Body Spa Firm/Company
4651 Bobcock St NE Unit 18 # 32
Palm Bay, FL 32905 City/State and Zip Code Pathartfeld @gmal. wm E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Patrica tartfield (321) 271-5823 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□\$125.00 Filing Fee □\$130.00 Filing Fee & Certificate of Status
Mailing Address New Filing Section Division of Corporations Street Address New Filing Section Division The Centre of Tallahassee

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

(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:		
4651 Baback ST NE	4651 Bahcock St NE		
Unit 18 # 324	Unit 18 # 324		
Palm Bay, FL 32905	Palm Bay, FL 32905		

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:

Name

4651 Bubcock St NE Unit 18 # 329

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

Palm Bay FL 32905

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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and the state of the state of

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

Title:	Name and Address:
"MGR" = Authorized Member "MGR" = Manager	X Patricia Hartfield 4651 Babcoch St NE Unit 18 #324 Palm Bay, FL 32905
	
(Use attachment if necessary)	ic date of filing: September 1st 2021
(If an effective date is listed, the date must the 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
the document's effective date on the Depart ARTICLE VI: Other provisions, if any.	tment of State's records.
Detox business	Ju-Nique Body Spa is a Body J- which also implements Health-
REOUIRED SIGNATURE:	00 2 Ll A 20 -
This document is	f a member or an authorized representative of a member. executed in accordance with section 605.0203 (1) (b) Florida Statutes.
I am aware that an constitutes a third	y false information submitted in a document to the Department of State degree felony as provided for in s.817.155, F.S.
1001	Typed or printed name of signee
\$125.00 Filing Fee for Articles \$ 30.00 Certified Copy (Option	of Organization and Designation of Registered Agent
\$ 5.00 Certificate of Status (O	

41 - 15 (00) -