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| (Requestor's Name)                      |  |  |  |  |  |
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| (Address)                               |  |  |  |  |  |
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| (City/State/Zip/Phone #)                |  |  |  |  |  |
| PICK-UP WAIT MAIL                       |  |  |  |  |  |
| (Business Entity Name)                  |  |  |  |  |  |
| (Document Number)                       |  |  |  |  |  |
| Certified Copies Certificates of Status |  |  |  |  |  |
| Special Instructions to Filing Officer: |  |  |  |  |  |
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## CORPORATE ACCESS, \_

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#### **WALK IN**

|                  |   | 1       | WALK III                              |             |              |
|------------------|---|---------|---------------------------------------|-------------|--------------|
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| XX               | CERTIFIED COPY PHOTOCOPY                          |         |                                       |             |              |
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| XX               | FILING  | LLC     | · · · · · · · · · · · · · · · · · · · |             |              |
| 1.               | ZURI AESTHETICS, LL<br>(CORPORATE NAME AND DOCUME |         |                                       |             |              |
| 2.               | (CORPORATE NAME AND DOCUM                         | MENT #) |                                       | .,          | <del>,</del> |
| 3.               | (CORPORATE NAME AND DOCUM                         | MENT #) |                                       |             |              |
| 4.               | (CORPORATE NAME AND DOCUM                         | MENT #) |                                       |             | <del></del>  |
| 5.               | (CORPORATE NAME AND DOCUM                         | MENT #) |                                       |             | <del></del>  |
| 6.               | (CORPORATE NAME AND DOCUM                         | MENT #) |                                       | <del></del> |              |
| SPECIA<br>INSTRU | AL<br>JCTIONS:                                    |         |                                       |             |              |
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### ARTICLES OF ORGANIZATION OF ZURI AESTHETICS, LLC

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- 1. The name of the limited liability company is ZURI AESTHETICS, LLC.
- 2. The mailing and street address of the principal office of the limited liability company is:

7540 SW 61st Ave South Miami, FL 33143

3. The name and street address of the initial registered agent of the limited liability company are:

Bauer Gutierrez & Borbon, PLLC 814 Ponce de Leon Blvd., Ste. 210 Coral Gables, FL 33134

4. The limited liability company shall be manager-managed. The name and address of the initial Manager of the limited liability company are:

Alexander Zuriarrain 7540 SW 61st Ave South Miami, FL 33143

Dated: as of June 8 2022.

/s/ Efraim R. Gutierrez

Efraim R. Gutierrez, Authorized Representative

#### ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

The undersigned, as Manager and on behalf of BAUER GUTIERREZ & BORBON, PLLC, a Florida professional limited liability company, which has been designated in the foregoing Articles of Organization as registered agent for ZURI AESTHETICS, LLC, a Florida limited liability company, hereby agrees that it will accept service of process for and on behalf of ZURI AESTHETICS, LLC, a Florida limited liability company, and it will comply with any and all laws relating to the complete and proper performance of the duties and obligations of a registered agent of a Florida limited liability company.

Dated: as of June 8, 2022

Bauer Gutierrez & Borbon, PLLC, a Florida professional limited liability company, as Registered Agent

By: Efraim R. Gutierrez

Efraim R. Gutierrez, Manager