

Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : FASTKIT CORP
Account Number : I20100000009
Phone : (305)599-0839
Fax Number : (305)592-9591

****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.
Glosense Dermatology & Aesthetics LLC

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

2023 NOV 27 AM 10:09
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DIVISION OF CORPORATIONS
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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY
COMPANY**

ARTICLE I NAME

The name of this Florida Limited Liability Company is:

Glosense Dermatology & Aesthetics LLC


ARTICLE II - ADDRESS

7875 S.W. 104 Street
Suite 203
Miami, FL 33156

ARTICLE III - REGISTERED AGENT

Annie Gonzalez
7875 S.W. 104 Street
Suite 203
Miami, FL 33156

Having been named registered agent and to accept service of process for the above
stated limited liability company at the place I designated, I hereby accept the
appointment as registered agent and agree to act in this capacity.


Signature

Date 11/20/23

CLERK OF STATE
TALLAHASSEE, FL

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ARTICLE IV - MANAGEMENT

The name and address of managing members or managers:

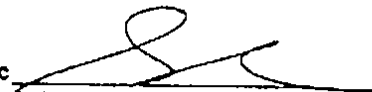
Annie Gonzalez
7875 S.W. 104 Street
Suite 203
Miami, FL 33156

ARTICLE V - COMPANY EXISTANCE

The effective date for this Limited Liability Company shall be:

November 20, 2023

Signature



Date

11/20/23

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