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## FLORIDA LIMITED LIABILITY CO. PURLUXE NAILS AND LASHES, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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## 8

	RIDA LIMITED LIABILITY COMPANY 4 HAY -3 PM 12: 48
ARTICLE 1 - Name: The name of the Limited Liability Company is:	TALLAHASSEE, ELIOPUI
Durling Nails and Lachas LLC	· werwiwaass, i fuwii
Purluxe Nails and Lashes, LLC (Must contain the words "Limited Liabil	litu (Campany 1) I (C. P. achil I (C. P.)
(Mass contain the Fords Emitted Enton	ing company, Limes, or BEC.
ARTICLE II - Address:	
The mailing address and street address of the principal office	of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
369 NE 167 St.	3440 SW 142 Ave.
Miami, FL 33162	Miramar, FL 33027
ARTICLE III - Registered Agent, Registered Office, & Re The Limited Liability Company cannot serve as its own Regionother business entity with an active Florida registration.)	
The name and the Florida street address of the registered agen	nt are:
<u>Georgina Blanco. P.</u> Nan	
_10261 Sunset Dr., S	Suite C-101

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

am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Miami, FL 33173

City Zip State 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

Georgina Blanco
Registered Agent's Signature (REQUIRED)

(CONTINUED)

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGK	TUAN NGUYEN 3440 SW 142 Ave. Miramar, FL 3302/
(Use attachment if necessary)  ARTICLE V: Effective date if other than the date.	of filing: May 1st, 2024 (OPTIONAL)
(If an effective date is listed, the date must be spe the date of filing.)	ecific and cannot be more than five business days prior to or 90 days after teet the applicable statutory filing requirements, this date will not be listed as
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	
This document is execute I am aware that any false	mber or an authorized representative of a member, ed in accordance with section 605.0203 (1) (b), Florida Statutes, information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.
TUAN NGUYEN	N Typed or printed name of signee

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)