Fax: +13057143014



12/17/2024 12:55 PM

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000414287 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : CUSI CONSULTING, INC.

Account Number : I20230000150 Phone : (786)616-3495

Fax Number : (305)714-3014

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.

Aura Glam, LLC.

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

Page: 2 of 3 12/17/2024 12:55 PM

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	Aura Glan	ı, LLC	
(Must co	ntain the words "Limited I	Liability Company, "	'L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street	address of the principal o	ffice of the Limited 1	Liability Company is:
Princ	ipal Office Address:		Mailing Address:
3645 NDV 13 February			
3645 NW 12 Stree			
Miami, FL 33125 ARTICLE III - Registered A (The Limited Liability Compa	gent, Registered Office, only cannot serve as its own	Registered Agent. Y	t's Signature: ou must designate an individual o
Miami, FL 33125 ARTICLE III - Registered A (The Limited Liability Compa another business entity with a	gent, Registered Office, on yeannot serve as its own a active Florida registrations address of the registered	Registered Agent. Y n.) agent are:	
Miami, FL 33125 ARTICLE III - Registered A	gent, Registered Office, on the communication of serve as its own a active Florida registration	Registered Agent. Y n.) agent are:	
Miami, FL 33125 ARTICLE III - Registered A (The Limited Liability Compa another business entity with a	gent, Registered Office, on yeannot serve as its own a active Florida registrations address of the registered	Registered Agent. Y n.) agent are:	
Miami, FL 33125 ARTICLE III - Registered A (The Limited Liability Compa another business entity with a	gent, Registered Office, only cannot serve as its own a active Florida registration address of the registered Yenia Montero Lanza 3645 NW 12 Street	Registered Agent. Y n.) agent are: Name	ou must designate an individual o
Miami, FL 33125 ARTICLE III - Registered A (The Limited Liability Compa another business entity with a	gent, Registered Office, on cannot serve as its own a active Florida registration address of the registered Yenia Montero Lanza	Registered Agent. Y n.) agent are: Name	ou must designate an individual o
Miami, FL 33125 ARTICLE III - Registered A (The Limited Liability Compa another business entity with a	gent, Registered Office, only cannot serve as its own a active Florida registration address of the registered Yenia Montero Lanza 3645 NW 12 Street	Registered Agent. Y n.) agent are: Name	ou must designate an individual o

ľ 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)



Page: 3 of 3

4	D1	Γī	c_1	LE.	13	7
/ L	n		٠.,	41.		, -

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

Title:	Name and Address;
"AMBR" = Authorized Member "MGR" = Manager	
AMBR	Yenia Montero Lanza
AMIZK	3645 NW 12 Street
	Miami, FI, 33125
AMBR	Alberto Valladares
	3645 NW 12 Street
	Miami, FL 33125
effective date is listed, the date muste of filing.)	the date of filing: (OPTIONAL) st be specific and cannot be more than five business days prior to or 90 days es not meet the applicable statutory filing requirements, this date will not be li
CLEV: Effective date, if other than the effective date is listed, the date must be of filing.) If the date inserted in this block document's effective date on the Department.	st be specific and cannot be more than five business days prior to or 90 days es not meet the applicable statutory filing requirements, this date will not be li
CLE V: Effective date, if other than the effective date is listed, the date must be of filing.) If the date inserted in this block do	st be specific and cannot be more than five business days prior to or 90 days es not meet the applicable statutory filing requirements, this date will not be li
CLEV: Effective date, if other than the effective date is listed, the date must be of filing.) If the date inserted in this block document's effective date on the Department.	st be specific and cannot be more than five business days prior to or 90 days es not meet the applicable statutory filing requirements, this date will not be li
CLEV: Effective date, if other than the effective date is listed, the date must be of filing.) If the date inserted in this block document's effective date on the Department.	st be specific and cannot be more than five business days prior to or 90 days es not meet the applicable statutory filing requirements, this date will not be li
CLE V: Effective date, if other than reffective date is listed, the date must se of filing.) If the date inserted in this block do cument's effective date on the Depa CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature This document is I am aware that a	st be specific and cannot be more than five business days prior to or 90 days es not meet the applicable statutory filing requirements, this date will not be li
CLE V: Effective date, if other than reffective date is listed, the date must se of filing.) If the date inserted in this block do cument's effective date on the Depa CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature This document is I am aware that a	of a member or an authorized representative of a member. s executed in accordance with section 605.0203 (1) (b), Florida Statutes. my false information submitted in a document to the Department of State degree felony as provided for in s.817.155. F.S. Yenia Montero Lanza
CLE V: Effective date, if other than reffective date is listed, the date must se of filing.) If the date inserted in this block do cument's effective date on the Depa CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature This document is I am aware that a	of a member or an authorized representative of a member. s executed in accordance with section 605.0203 (1) (b), Florida Statutes. my false information submitted in a document to the Department of State degree felony as provided for in s.817.155, F.S. Yenia Montero Lanza
CLE V: Effective date, if other than reffective date is listed, the date must se of filing.) If the date inserted in this block do cument's effective date on the Depa CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature This document is I am aware that a	of a member or an authorized representative of a member. s executed in accordance with section 605.0203 (1) (b), Florida Statutes. my false information submitted in a document to the Department of State degree felony as provided for in s.817.155, F.S. Yenia Montero Lanza
CLE V: Effective date, if other than reffective date is listed, the date muste of filing.) If the date inserted in this block document's effective date on the Department's effective date on	of a member or an authorized representative of a member. s executed in accordance with section 605.0203 (1) (b), Florida Statutes. ny false information submitted in a document to the Department of State degree felony as provided for in s.817.155, F.S. Yenia Montero Lanza Typed or printed name of signee Filing Fees: s of Organization and Designation of Registered Agent
CLE V: Effective date, if other than beffective date is listed, the date muste of filing.) If the date inserted in this block do cument's effective date on the Department's effective date on	of a member or an authorized representative of a member. s executed in accordance with section 605.0203 (1) (b), Florida Statutes. my false information submitted in a document to the Department of State degree felony as provided for in s.817.155. F.S. Yenia Montero Lanza Typed or printed name of signee Filing Fees: s of Organization and Designation of Registered Agent onal)
CLE V: Effective date, if other than reffective date is listed, the date muste of filing.) If the date inserted in this block document's effective date on the Department's effective date on	of a member or an authorized representative of a member. s executed in accordance with section 605.0203 (1) (b), Florida Statutes. my false information submitted in a document to the Department of State degree felony as provided for in s.817.155. F.S. Yenia Montero Lanza Typed or printed name of signee Filing Fees: s of Organization and Designation of Registered Agent onal)