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FLORIDA DIVISION OF CORPORATIO

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TO: DIVISION OF CORPORATIONS FROM: FAS-T CORP. AGENTS, INC.
DEPARTMENT OF STATE 8405 NW 53RD ST
STATE OF FLORIDA SUITE C-100
400 EAST GAINED STREET MIAMI FL 33166-
TALLAHASSEE, FL 32399 CONTACT: LIDIA FERNANDEZ
FAX: (904) 922-4000 PHONE: (305) 599-0839
FAX: (305) 592-9591

DOCUMENT TYPE: LIMITED LIABILITY COMPANY
NAME: BIOACTIF SKINCARE PRODUCTS, XXX L.C.
FAX AUDIT NUMBER: H95000009632 CURRENT STATUS: REQUESTED
DATE REQUESTED: 08/30/1995 TIME REQUESTED: 13:53:00
CERTIFIED COPIES: 0 CERTIFICATE OF STATUS: 0
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TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLE I - Name:

The name of the Limited Liability Company is:

BIO ACTIVE SKINCARE PRODUCTS L.C.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

P.O. BOX 65-0564 MIAMI, FLORIDA 33265

ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be:

PERPETUAL

ARTICLE IV - Management:

(check and complete the appropriate statement)

☒ The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

MARY REGUERA - 9240 SW 72ST Suite 201 MIAMI FL 33173
ALDO REGUERA - 9240 S.W. 72ST. Suite 201
MIAMI, FL. 33173

☐ The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/ are:

Prepared by: Mary Reguera
9240 SW 72nd St. Suite 201
Miami, FL 33173
(305) 267-1512

ARTICLE V - Admission of Additional Members:
The right, if given, of the remaining members to admit additional members and the terms and conditions of the admissions shall be:

*This right is permitted in the event
that one of the existing members terminates
or is unable to continue ^{AS} an active
member of the company.*

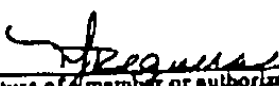
ARTICLE VI - Members Rights to Continue Business:
The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be:

*The right of the remaining members to
continue the business is to be accepted.*
and

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of _____
BIOACTIVE SKINCARE PRODUCTS ^{L.L.C.} deposes and says:

- 1) the above named limited liability company has at least two members
- 2) the total amount of cash contributed by the member(s) is \$ 500
- 3) if any, the agreed value of property other than cash contributed by member(s) is
\$ 1,000 . A description of the property is attached and made a part hereto.
- 4) the total amount of cash or property anticipated to be contributed by member(s) is
\$ 1,500 . This total includes amounts from 2 and 3 above.


Signature of a member or authorized representative of a member.
(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalty of perjury that the facts stated herein are true.)

FILING FEE: \$ 250 for Articles of Organization and Affidavit

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: _____

BIOACTIVE SKINCARE PRODUCTS L.C.

2. The name and address of the registered agent and office is:

MARY REGUERA
(Name)

9240 SW 72 ST SUITE 801
(P.O. Box not acceptable)

MIAMI FL 33173
(City/State/Zip)

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TALLAHASSEE, FLORIDA

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.

M. Reguera
(Signature)

Aug 30, 1995
(Date)

FILING FEE: \$ 35 for Designation of Registered Agent