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TRANSMITTAL LETTER

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TALLAN TERM OF STATES

TO: Registration Section
Division of Corporations

SUBJECT: FACELIFT COSMETICS, 22C.

(Name of Limited Liability Company)

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

LISA MARIE BRYANT (Name of Person)
LiBerty TAY SUCE. (Firm/Company)
(Firm/Company)
1238 WASHINGTON Are.
(Address)
Mian; BEACH, FL: 33/39 (City/State and Zip Code)

For further information concerning this matter, please call:

Lidit Shepherd at (786) 663-1742;
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

□ \$125.00 Filing Fee □ \$130.00 Filing Fee & □ \$155.00 Filing Fee & ₺ \$160.00 Filing Fee, Certificate

Certificate of Status Certified Copy of Status & Certified Copy

FILED

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA 18 P 4: 07

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1. FACE LIFT COSMETICS LLC. (Name of Foreign Limited Liability Company)
2. (Jurisdiction under the law of which foreign limited liability company is organized) 3. 43-2858036 (FEI number, if applicable)
4. JULY 23 2004 (Date of Organization) 5. DEPETUAL (Duration: Year limited liability company will cease to exist or "perpetual")
6NONE.
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. VAZ-U-CORP. SUCE, INC.
1802 NORTH CAPSON St. Secto 212, CARSON CITY, VECADA 89701 (Street Address of Principal Office)
8. If limited liability company is a manager-managed company, check here [V]
9. The name and usual business addresses of the managing members or managers are as follows:
LIDIA M. SHEPHERD 1602 ALTON Rel # 424 Miam; BOACH FL. 33139 Luis R. SHEPHERD 1602 ALTON RAHYZY M.B. Fl. 33139
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida: Repail WHOLESALE
MPORT-EXPORT OF COMMETICS & SKINCARE PRODUCTS.
the solly =
Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)
LIDIA M. SHEPHERN
Typed or printed name of signee

FILED

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

104 (CT 18 P 4: D7

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

FACE LIET COSMETICS, LLC
2. The name and the Florida street address of the registered agent and office are:
Lisa MARIE BRYANT
1238 WASHINGTON AV P. Florida Street Address (P.O. Box NOT ACCEPTABLE)
M. AMI BEACHFL 33139 City/State/Zip
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 register

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 as provided for in Chapter 608, Florida Statutes.

1. The name of the Limited Liability Company is:

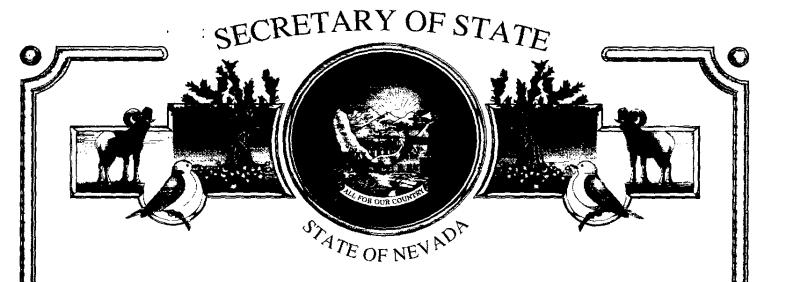
(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

Certified Copy (optional) \$ 30.00

5.00 Certificate of Status (optional)



LIMITED-LIABILITY COMPANY CHARTER

I, DEAN HELLER, the Nevada Secretary of State, do hereby certify that FACE LIFT COSMETICS LLC did on July 23, 2004, file in this office the Articles of Organization for a Limited-Liability Company, that said Articles are now on file and of record in the office of the Nevada Secretary of State, and further, that said Articles contain the provisions required by the laws governing Limited-Liability Companies in the State of Nevada.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office in Carson City, Nevada, on July 23, 2004.

DEAN HELLER Secretary of State

By P.K. Otterstrom

Certification Clerk