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SECRETARY OF STATE
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#### **COVER LETTER**

TO: Registration Section

Division of Corporations		
SUBJECT: D'Arcy Acquisition, LLC		
	Limited Liability Company)	
••	d Liability Company for Authorization to Transacture submitted to register the above referenced foreign.	
Please return all correspondence concerning the	his matter to the following:	
David Chenkin, Esq.		
	(Name of Person)	
Kahn & Chenkin		01V 07
	(Firm/Company)	KECRE ISION
8551 W. Sunrise Blvd., Suite 210		SECRETARY OF STALE IVISION OF CORPORATION  O7 MAR 27 AM 11: 05
(Address)		AH AF OF S
Plantation, FL 33322		ATIONS
(Ci	ty/State and Zip Code)	
For further information concerning this matter	r, please call:	
David Chenkin, Esq.	at ( 954 ) 476-7994	
(Name of Person)	(Area Code & Daytime Telephone Nur	nber)
MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed is a check for the following amount:  \$\sum \frac{1}{2}\$125.00 Filing Fee \$\sum \frac{1}{2}\$130.00 Filing Fertific	Fee & \$\Bigcap\$ \$155.00 Filing Fee & \$\Bigcap\$ \$160.00 Filing Fee	e, Certificate & Certified Copy

### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

D'Arcy Acquisition, LLC		
(Name of Foreign Limited Lia	bility Company)	
Delaware 3.	20-8038704	
urisdiction under the law of which foreign limited liability ompany is organized)	(FEI number, if applicable)	
November 27, 2006 5	Perpetual	
(Date of Organization)	(Duration: Year limited liability company will cea exist or "perpetual")	ise to
N / A (Date first transacted business in Flori (See sections 608,501 & 608,502 F.S. to	ida, if prior to registration.) o determine penalty liability)	
2015 SW 2nd Avenue	·	
Pompano Beach, FL 33069		
	Principal Office)	<b>b7</b>
If limited liability company is a manager-managed company, check here		' MAR 27
in initied habitity company is a manager-managed c	ompany, check here [4]	≈ 2
The name and usual business addresses of the manag	ging members or managers are as follows:	1
Richard Nicolo, Manager	_	3
Trondro Tricolo, Indilage		<del>-</del>
George Simone, Manager		20
Attached is an original certificate of existence, no more than 90 da jurisdiction under the law of which it is organized. (A photocopy instation of the certificate under oath of the translator must be submit.  Nature of business or purposes to be conducted or present the	is not acceptable. If the certificate is in a foreign languated.)	age, a
skin care products and all other activities re	elated thereto	
(Ralphale)		
Signature of a member or an auth (In accordance with section 608.408(3), F.S an affirmation under the penalties of perjur	norized representative of a member.  ., the execution of this document constitutes y that the facts stated herein are true.)	
Richard Nicolo, Manager	· · · · · · · · · · · · · · · · · · ·	
Typed or printed r	name of signee	

## 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 TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Com	pany is:	
D'Arcy Acquisition, LLC	<u> </u>	
2. The name and the Florida street address	s of the registered agent and office are:	
David Chenkin, Esq	ļ <b>.</b>	SEC DIVISIO
	(Name)	MAR 27
8551 W. Sunrise E	Blvd., Suite 210	±,500 ± 500
Florida Street Address (P.O. Box NOT ACCEPTABLE)		AM II:
Plantation	FL 33322	- 20 SHOIL 110 110 110 110 110 110 110 110 110 11
	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 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 as provided for in Chapter 608, Florida Statutes.

(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

# Delaware

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#### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "D'ARCY ACQUISITION, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SECOND DAY OF MARCH, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "D'ARCY ACQUISITION, LLC" WAS FORMED ON THE TWENTY-SEVENTH DAY OF NOVEMBER, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

SECRETARY OF STATE
DIVISION OF CORPORATIONS



4257116 8300 070347820 Warret Smith Hindson

Harriet Smith Windsor, Secretary of State **AUTHENTICATION:** 5528612

DATE: 03-22-07