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

**Registration Section** 

TO:

Division	of Corporatio	ns			
SUBJECT:		Lasting Nam	Beau e of Lim	ity by Sabrina L.\ hited Liability Company	_,C,
					ransact Business in Florida," Certificate of ty company to transact business in Florida
Please return all c	оттекропиенс	e concerning this mat	ter to the	e following:	
				orina Bowes ume of Person	
-		La	sting B Fir	Beauty by Sabrina L.	da C.
-		······································	2777	Ravella Way Address	
-		Palm I		Gardens, FL 33410 ate and Zip Code	·····
_		lastingb E-mail address: (to	eautyb be used	ysabrina@yahoo.com I for future annual report noti	fication)
For further inform	nation concerr	ing this matter, pleas	e call:		
<del> </del>		rina Bowes e of Person	Area	at (561) a Code & Daytime Telephon	310-4880 e Number
Division Registrat P.O. Box	of Corporation Section 6327 See, FL 32314	ns	Division Registra Clifton 2661 Ex	n of Corporations ation Section Building xecutive Center Circle assee, FL 32301	
Enclosed is a c	heck for the	e following amour	nt:		
\$125.0	00 Filing Fee	\$130.00 Filing Certificate of		\$155.00 Filing Fee & Certified Copy	\$160.00 Filing Fee, Certificate of Status & Certified Copy

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

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: Lasting Beauty by Sabrina (Name of Foreign Limited Liability Company; must include "Limited Liability Company (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.") (Jurisdiction under the law of which foreign limited liability company is organized) November 2008 (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") Upon qualification (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 7. 2777 Ravella Way Palm Beach Gardens, FL 33410 (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows: Sabrina Bowes 2777 Ravella Way PAIm Beach Gardens, FL 33410 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: 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.)

Sabrina Bowes
Typed or printed 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 Company is:	
	Lasting Beauty by Sabrina L.L.C.	
If unavailable, th	ne alternate to be used in the state of Florida is:	
2. The name and	d the Florida street address of the registered agent and office are:	SECT TALL
	Sabrina Bowls (Name)	FILED JAN 22 AM II: 15 EGRETARY OF STATE ALLAHASSEE, FLORIDI
	2777 Ravella Way Florida Street Address (P.O. Box NOT ACCEPTABLE)	F STATE FLORIDA
	Palm Beach Gardens, FL 33410 City/State/Zip	<del>_</del>
Having been nam	ned as registered agent and to accept service of process for the above	stated limited

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)

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



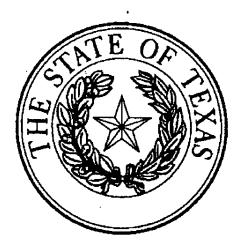
### Office of the Secretary of State

#### **Certificate of Fact**

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Lasting Beauty by Sabrina, LLC (file number 801053402), a Domestic Limited Liability Company (LLC), was filed in this office on November 17, 2008.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on January 11, 2010.



Hope Andrade Secretary of State