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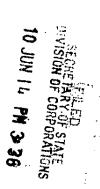
| (Re | equestor's Name) | |
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| (Cit | y/State/Zip/Phon | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nar | me) |
| (Do | cument Number) | , |
| Certified Copies | | |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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B. KOHR

JUN 14 2010

EXAMINER

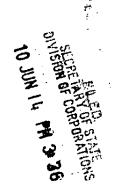


FLORIDA DEPARTMENT OF STATE Division of Corporations

May 18, 2010

ALBERT G. YUSKO EVENT MAKERS, LLC 5911 55TH DRIVE EAST BRADENTON, FL 34203

SUBJECT: EVENT MAKERS, LLC Ref. Number: W10000024163



We have received your document for EVENT MAKERS, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have also retained YOUR \$130.00 PAYMENT.

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a foreign limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations. Therefore, the limited liability company must select an alternate name for use in the state of Florida. Also, please note that adding "of Florida" or "Florida" to the end of the name is not acceptable.

Please insert the alternate name in the space provided on the application form. You must also attach a copy of the written consent of the managers or managing members adopting the alternate name for Florida. For your convenience, we are enclosing a fill-in-the-blank form for you to complete and return to our office for processing.

The alternate name must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The word "Limited"may be abbreviated as "Ltd." and the word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable limited liability company suffixes in Florida: "Limited Company," "L.C.," and "LC."

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr Regulatory Specialist II

Letter Number: 710A00012471

COVER LETTER

| | ration Section on of Corporations | 6 |
|-------------------------------------|--|--|
| SUBJECT: _ | EVEN)+ | Makers LLC ne of Limited Liability Company |
| Jebober | Nan | Makers LLC ne of Limited Liability Company |
| The enclosed "A Existence, and o | Application by Foreign Limited Liab check are submitted to register the al | ne of Limited Liability Company ility Company for Authorization to Transact Business in Florida," Certification of the Florida of the Company for Authorization to Transact Business in Florida of the Fl |
| Please return all | correspondence concerning this ma | tter to the following: |
| | Albert | Name of Person |
| | <u>Event</u> | Firm/Company |
| | 5911 -5. | 5th Drive East Address |
| N | Bradent | ON, Florida 34203 City/State and Zip Code |
| - | Sal U E-mail address: (to | be used for future annual report notification) |
| For further infor | mation concerning this matter, pleas | e call: |
| Ala | Name of Person | at (941) 727-7221 Area Code & Daytime Telephone Number |
| Division Registra P.O. Bo | NG ADDRESS: n of Corporations ation Section ox 6327 ssee, FL 32314 | STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 |
| Enclosed is a | check for the following amoun | t: |
| \$125. | .00 Filing Fee \$130.00 Filing Certificate of | |

COVER LETTER

| TO: | Registration Section Division of Corporations |
|--------|--|
| SUBJ | Registration Section Division of Corporations ECT: Even+ Makels LLC Name of Limited Liability Company |
| | nclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate nce, and check are submitted to register the above referenced foreign limited liability company to transact business in Flor |
| Please | return all correspondence concerning this matter to the following: |
| | Albert 6. Yusko Name of Person |
| | Event Makers Cosmetics LLC Firm/Company |
| | 5911 55th Deive Fast Address |
| | Bradentow, Florida 34203 City/State and Zip Code |
| | Salulyusko @ aol.com E-mail address: (to be used for future annual report notification) |
| For fu | rther information concerning this matter, please call: |
| | Albert or Sallie Yusko at (941) 727-7221 Name of Person Area Code & Daytime Telephone Number |
| | MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 |
| Enclo | sed is a check for the following amount: \$\int\\$\$125.00 \text{Filing Fee} \text{\$\subseteq}\$\$\$\$\$130.00 \text{Filing Fee} \text{\$\subseteq}\$ |

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: |
|---|
| 1. Even+ Makers, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") |
| Event Makers Cosmetics LLC |
| (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.") |
| 2. Kerrfucky (Jurisdiction under the law of which foreign limited liability) 3. 20-1488364 (FEI number, if applicable) |
| company is organized) |
| 4. 1/1/06 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual") |
| 6. (Date first transacted business in Florida, if prior to registration.) (See sections 608 501 & 608 502 F.S. to determine penalty liability) |
| (See Sections Cod.Set & Cod.Set 1.5. to determine penalty fluoring) |
| 7. 710 Speuce Lane, ElizabetHown KY 4270/3 |
| (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: |
| Albert Yusko 5911 55th Drive East, Bradenton Florida 3420. |
| Albert Yusko 5911 55th Drive East, Bradenton Florida 34203 Salle Yusko 5911 55th Drive East, Bradenton Florida 34203 |
| |
| 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: |
| Web based business / Performance Cosmetics www.eventmaterscosmetics.com Cami Y. Dudlug-member |
| Cam y. Dudley-member |
| 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.) |
| Carrie y. Dudley - member Typed or printed name of signee |
| ryped or printed name or signed |

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: |
|--|
| Event Makers LLC |
| If unavailable, the alternate to be used in the state of Florida is: |
| EVENT Makers Cosmetics LLC |
| 2. The name and the Florida street address of the registered agent and office are: |
| Albert G. Yusko (Name) |
| 5911 55th Drive East Florida Street Address (P.O. Box NOT ACCEPTABLE) |
| Bradentow FL 34203 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.

Cam y. Dodlug - number (Signature)

\$ 100.00 Filing Fee for Application\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)

WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

| We, the undersigned, do hereby certify that we are the Managers and/or Managing |
|--|
| Members of <u>Even+ Makers LLC</u> (Name of Limited Liability Company) |
| (Name of Limited Liability Company) |
| a limited liability company duly organized and existing under the laws of |
| (State or Country of Organization) |
| Because the name of this foreign limited liability company does not satisfy the |
| requirements of the s. 608.406, F.S., the limited liability company hereby adopts the |
| following name to transact business in the state of Florida: |
| Even+ Makers Cosmetics LLC (Name to be used by limited liability company in Florida. NOTE: Name must end with Limited Liability Company, L.L.C., or LLC.) |
| Date: 6/8/10 |
| Signature(s) of Manager(s) and/or Managing Member(s): |
| Carin 4. Dudley member. |
| |
| |
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| |
| |
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| |

Commonwealth of Kentucky Trey Grayson, Secretary of State

Trey Grayson
Secretary of State
P. O. Box 718
Frankfort, KY 40602-0718
(502) 564-3490
http://www.sos.ky.gov

Certificate of Existence

Authentication number: 97919

Visit http://apps.sos.ky.gov/business/obdb/certvalidate.aspx to authenticate this certificate.

I, Trey Grayson, Secretary of State of the Commonwealth of Kentucky, do hereby certify that according to the records in the Office of the Secretary of State,

EVENT MAKERS, LLC

is a limited liability company duly organized and existing under KRS Chapter 275, whose date of organization is June 28, 2006 and whose period of duration is perpetual.

I further certify that all fees and penalties owed to the Secretary of State have been paid; that articles of dissolution have not been filed; and that the most recent annual report required by KRS 275.190 has been delivered to the Secretary of State.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal at Frankfort, Kentucky, this 11th day of May, 2010, in the 218th year of the Commonwealth.



Trey Grayson
Secretary of State
Commonwealth of Kentucky
97919/0641732