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COVER LETTER

TO:

Registration Section

Division of Corporations	
SUBJECT: Nature's Essence Hand	
Name of	of Limited Liability Company
	y Company for Authorization to Transact Business in Florida," Certificate of referenced foreign limited liability company to transact business in Florida
Please return all correspondence concerning this matter	r to the following:
Humberto Estevez	
	Name of Person
Nature's Essence Handmad	
	Firm/Company
P.O. Box 524176	
	Address
Miami, FL 33152	
	City/State and Zip Code
humberto.estevez@gma	ail.com e used for future annual report notification)
E-mail address: (to b	e used for future annual report notification)
For further information concerning this matter, please of	call:
Humberto Estevez	at (305) 934-3708
Name of Person	Area Code & Daytime Telephone Number
	STREET ADDRESS: Division of Corporations
Registration Section F	Registration Section
	Clifton Building
	2661 Executive Center Circle Fallahassee, FL 32301
Enclosed is a check for the following amount: \$\int\\$\$125.00 Filing Fee \times \$\$\$\$\$\$\$\$\$\$\$\$\$\$Certificate of Status	\$155.00 Filing Fee & \$\sqrt{\$160.00 Filing Fee, Certificate}\$

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. Nature's Essence Handmade Soaps LLC. (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
Inspired By Nature's Essence Handmade Soaps 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. North Carolina 3. 27-4554258
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4. 11/16/2010 5. Perpetual
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6. None
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 7. 1095 E King Street
7. 1095 E King Street
Boone, NC 28607
(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:
Humberto Estevez 2940 SW 130 Avenue, Miami FL 33175
Nicetas H Estevez 2940 SW 130 Avenue, Miami FL 33175
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:
Handmade Soaps
Thenlot Et
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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Typed or printed name of signee

Humberto Estevez

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:	
Nature's Essence Handmade Soaps LLC.	
If unavailable, the alternate to be used in the state of Florida is:	
Inspired By Nature's Essence Handmade Soap LLC.	

2. The name and the Florida street address of the registered agent and office are:

	(Name)	
1	•	
2940 SW 130 A	venue	
Florida Str	eet Address (P.O. Box NOT ACCEPTABLE)	21
Miami	FL 33175	7
	City/State/Zip	_ <u>\forall_{\finty}}}}}}}}}}}}}}}}}} \rightare}}}}}} \ \ \end{taburus \finall_{\forall_{\fint\finty}}}}}}}}}}}}}}}}}}}}}}}}}} \ \end{taburus \finall_{\forall_{\fint\finty}}}}\etailititity}}}}}}}}}}}}}}}}}}}}}}} \ ptittillimit) \finall_{\forall_{\</u>
	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)



NORTH CAROLINA Department of The Secretary of State

CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

NATURE'S ESSENCE HANDMADE SOAPS L.L.C.

is a limited liability company duly formed under the laws of the State of North Carolina, having been formed on the 16th day of November, 2010, with its period of duration being Perpetual.

I FURTHER certify that the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act; and that the said limited liability company has not filed articles of dissolution as of this date of this certificate.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 14th day of January, 2011.

Claire J. Marshall

Secretary of State