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DATE:

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NAME:

NOBLE AESTHETICS, LLC

TYPE OF FILING: APPLICATION

COST:

155.00 - Client arready Raid, See attached

RETURN: CERTIFIED COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

Hutchison PLLC

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101 SE 2nd Place, Suite E201D | Gainesville, FL 32601

675 Ponce de Leon Avenue NE, Suite 8500 | Atlanta, GA 30308

hutchlaw.com

April 16, 2018

Division of Corporations Registration Section PO Box 6327 Tallahassee, FL 32314 Attn: Yasemin Sulker

> RE: Document Number - W18000033825 Entity Name - Noble Aesthetics, LLC

Dear Ms. Sulker,

In connection with the rejected filing referenced above, please accept the submission Θ the following missing items:

- 1. Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida signed by Paracorp Incorporated, as Registered Agent; and
- 2. Delaware Certificate of Good Standing.

Please note that we do not have a copy of the rejection letter (as it may have been lost in the mail). Please rely upon this cover letter as permission to proceed with the resubmitted filing in lieu of a copy of the rejection letter.

If you have any questions or require any additional information or documents, please contact me directly at emillett@hutchlaw.com or 919-829-4307.

Sincerely,

Elisia Millett Corporate Paralegal

Olswarmul G

H#615284

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

ı/a	Limited Liability Company; must include "Lie	y sampany	
	name adopted for the purpose of transacting business in	Florida. The alternate name mu-	est include "Limited Liability Company," "L.L.C," or "LLC
Delaware		3.	
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	J	(FEI number, if applicable)
·	(Date first transacted business in Florida, if prio	r to registration	···
7440 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	(See sections 605 0904 & 605 0905, F.S. to det	ermine penalty liability)	
. 7460 NW 127th Terrae	CC Principal Office)	6	(Mailing Address)
Parkland, FL 33076	, marina sinari		(maning roducti)
	·	<u> </u>	
Name and street address	ss of Florida registered agent: (P.O. B	ov NOT accentable)	
rame and street addres	-	iox ivor acceptable)	
Name:	Paracorp Incorporated		
Office Address:	155 Office Plaza Drive, 1st Floor		
	Tallahaman		12101
	Tallahassee (City)	, Flo	orida 32301 (Zip code)
egistered agent's accep	•		(Zip code)
id accept the obligation.	s of my position as registered agent.	per and complete perfo	formance of my duties, and I am familia
nd accept the obligation	s of my position as registered agent.	per and complete perfo	formance of my duties, and I am familia
nd accept the obligation			formance of my duties, and I am familia.
	S of my position as registered agent. Please see the attached consent (Registered agent)	it's signature)	Ā. 2
	s of my position as registered agent. Please see the attached consent	it's signature)	manage is/are:
The name, title or capa <u>Title or Capacity:</u>	Please see the attached consent (Registered agent acity and address of the person(s) who	has/have authority to Title or Capa	manage is/are: Name and Address:
S. The name, title or cap	Please see the attached consent (Registered agent acity and address of the person(s) who Name and Address: Jeff Allen 7460 NW 127th Terrace	has/have authority to	manage is/are:
The name, title or capa <u>Title or Capacity:</u>	S of my position as registered agent. Please see the attached consent (Registered agent acity and address of the person(s) who Name and Address: Jeff Allen	has/have authority to Title or Capa	manage is/are: Name and/Address: Mark Wilkins 7460 NW 127th Tyrre Parkland, EL 33076
S. The name, title or cap; Title or Capacity: Manager	Please see the attached consent (Registered agent acity and address of the person(s) who Name and Address: Jeff Allen 7460 NW 127th Terrace Parkland, FL 33076	has/have authority to Title or Capa	manage is/are: Name and Address: Ntark Wilkins 7460 NW 27th Terre
The name, title or capa <u>Title or Capacity:</u>	Please see the attached consent (Registered agent) acity and address of the person(s) who Name and Address: Jeff Allen 7460 NW 127th Terrace Parkland, FL 33076 Sean Wilson	has/have authority to Title or Capa	manage is/are: Name and/Address: Mark Wilkins 7460 NW 127th Tyrre Parkland, EL 33076
The name, title or capa Title or Capacity: Manager	Please see the attached consent (Registered agent acity and address of the person(s) who Name and Address: Jeff Allen 7460 NW 127th Terrace Parkland, FL 33076	has/have authority to Title or Capa	manage is/are: Name and/Address: Mark Wilkins 7460 NW 127th Tyrre Parkland, EL 33076
. The name, title or cap; Title or Capacity: Manager Manager	Please see the attached consent (Registered agent actity and address of the person(s) who Name and Address: Jeff Allen 7460 NW 127th Terrace Parkland, FL 33076 Sean Wilson 7460 NW 127th Terrace Parkland, FL 33076	has/have authority to Title or Capa	manage is/are: Name and/Address: Mark Wilkins 7460 NW 127th Tyrre Parkland, EL 33076
S. The name, title or cap; Title or Capacity: Manager Manager	Please see the attached consent (Registered agent actity and address of the person(s) who Name and Address: Jeff Allen 7460 NW 127th Terrace Parkland, FL 33076 Sean Wilson 7460 NW 127th Terrace Parkland, FL 33076	has/have authority to Title or Capa	manage is/are: Name and/Address: Mark Wilkins 7460 NW 127th Tyrre Parkland, EL 33076
S. The name, title or cap; Title or Capacity: Manager Manager Use attachments if neces	Please see the attached consent (Registered agent acity and address of the person(s) who Name and Address: Jeff Allen 7460 NW 127th Terrace Parkland, FL 33076 Sean Wilson 7460 NW 127th Terrace Parkland, FL 33076 Sean Wilson 7460 NW 127th Terrace Parkland, FL 33076	has/have authority to : Title or Capa Manager	manage is/are: Name and Address: Mark Wilkins 7,460 NW 27th Torre Parkland, EL 33076
Manager Manager Matachments if neces Attached is a certificate risdiction under the law	Please see the attached consent (Registered agent actity and address of the person(s) who Name and Address: Jeff Allen 7460 NW 127th Terrace Parkland, FL 33076 Sean Wilson 7460 NW 127th Terrace Parkland, FL 33076 sary) of existence, no more than 90 days of of which it is organized. (If the certific	has/have authority to : Title or Capa Manager d, duly authenticated b	manage is/are: Name and/Address: Mark Wilkins 7460 NW 127th Tyrre Parkland, EL 33076
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Manager Manager Manager Manager Manager Manager On the translator must be stored. This document is executed.	Please see the attached consent (Registered agent acity and address of the person(s) who Name and Address: Jeff Allen 7460 NW 127th Terrace Parkland, FL 33076 Sean Wilson 7460 NW 127th Terrace Parkland, FL 33076 sary) of existence, no more than 90 days of of which it is organized. (If the certification accordance with section 605.02 of the Department of State constitutes a	has/have authority to Title or Capa Manager d, duly authenticated becate is in a foreign lang	manage is/are: Name and Address: Nark Wilkins 7,460 NW 127th Torre Parkland, FL 33076 by the official having custody of records it guage, a translation of the certificate under atutes. I am aware that any false information
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Typed or printed name of signee

STATE OF FLORIDA

REGISTERED AGENT CONSENT FORM

DATE: 4/16/2018

ENTITY NAME: Noble Aesthetics, LLC

REGISTERED AGENT NAME AND ADDRESS:

Paracorp Incorporated 155 Office Plaza Drive, 1st Floor Tallahassee, FL 32301

Paracorp Incorporated, having been designated to act as Statutory Agent, hereby consents to act in the capacity for the above-referenced entity until removed or resignation is submitted in accordance with the Florida Revised Statues.

Milton Vong , Assistant Secretary

Paracorp Incorporated

T I I I U

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "NOBLE AESTHETICS, 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 SIXTEENTH DAY OF APRIL, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NOBLE

AESTHETICS, LLC" WAS FORMED ON THE TWENTY-FIRST DAY OF MARCH, A.D.

2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

TILEU A 9 10



Authentication: 202519569

Date: 04-16-18

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