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### COVER LETTER

### TO: , Régistration Section Division of Corporations

The Skin Boutique, LLC

SUBJECT: \_

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Christy Imparato Name of Person The Skin Boutique Firm/Company 795 SW 3RD ST Address Boca Raton, FL 33486 City State and Zip Code christy@shoptheskinboutique.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 892-1566 Christy Imparato 954 Davtime Telephone Number Area Code Name of Contact Person Street Address: Mailing Address: **Registration Section Registration Section Division of Corporations Division of Corporations** The Centre of Tallahassee P.O. Box 6327 Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPARTMENT OF STATE

□ \$155.00 Filing Fee &

Certified Copy-

□ \$160,00 Filing Fee, Certificate

of Status & Certified Copy

□ \$130.00 Filing Fee &

Certificate of Status

🗐 \$125.00 Filmg Fee

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

### IN COMPLIANCE WITH SECTION 6950A2, FLORIDA STATUTES, THE FOLLOWING IN SUBMITTED TO REGISTER A FOREIGN-LIMITED LIABILITY COMPANYTOTRANSACT BUSINESS IN THE STATE OFFLORIDA:

L. The Skin Boutique, LL	C Earnited Liability Company; must include "Limite	T		· · · · · · · · · · · · · · · · · · ·		
SKN Boutique, LLC	fainted fability company, must herade 1.1muc	a chaolary y or	npony, 121201, of 1212.	1		
(If name unavailable, enter alternate r	nime adopted for the purpose of transacting business in F	lorida The altern	ate name must include "Limited	Liability Company," "L E C.	" of "LLC."	
Texas			85-0496188			
2. (Jurisdiction under the law of which foreign limited hability company is organized)		··· <u> </u>	(FEI mur	uber, i) applicable)		
-1						
···	(Date first transacted business in Florida, if prior to (See sections 605/0904 & 605/0905, F.S. to determ	registration ) and penalty habit	IIV)			
1201 Lady Bird Lane 5			5 SW 3RD ST			
(Street Address of Principal Office)		···	(Mailing Address)			
Apt 427		Bo	ca Raton, FL 33486			
Austin, TX 78741					-77	
<ol> <li>Name and <u>street addres</u></li> </ol>	is of Florida registered agent: (P.O. Boy	( <u>NOT </u> acce	ptable)	13 1	TT T	
Name:	Steven Imparato		_	88		
Office Address:	4651 N Federal Hwy			-		
	Boca Raton					
	(C.(W)		(Zip cisle)			

Registered agent's acceptance:

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 application. 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

6 (Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage {up to six (6) total}:

Title or Capacity:	Name and Address:	<u>Title or Capacity:</u>	<u>Name and Address:</u>	
⊡Manager	Name: Christy Imparato	⊡Manager	Name:	
<b>₩</b> Member	Address:	Member	Address:	
①Authorized	Boca Raton, FL 33486	□Authorized	Apt 427	
Person		Person	Austin TX 78741	
⊡Other	Other	D0ther	Other	
⊡Managei	Name:	Manager	Name:	
⊡Member	Address:	⊡Membei	Address:	
⊡Authorized		Authorized		
Person		Person		
□Other	⊡Other	⊡Othei	Other	
□Manager	Name:	□Manager	Name:	
⊡Member	Address:	⊡Member	Address:	
⊡Authorized		Authorized		
Person		Person		
⊡Other	Other	⊡Other	□Other	

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605,0203 (1) (b). Florida Statutes, 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 \$,817,155, F.S.



Typed or printed name of signee

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



Ruth R. Hughs Secretary of State

# 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 The Skin Boutique, LLC (file number 803579034), a Domestic Limited Liability Company (LLC), was filed in this office on March 20, 2020.

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 April 08, 2020.



Ruth R. Hughs Secretary of State