

M24000000984

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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((H24000035209 3)))



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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : LEGALZOOM.COM INC.
Account Number : I20010000062
Phone : (323)962-8600
Fax Number : (323)389-0502

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

Foreign Limited Liability Company
SHANTAE MCDONALD: THE BEAUTAE BAR LLC

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$155.00

FILED
2024 JAN 26 PM 4:15
SECRETARY OF STATE
TALLAHASSEE, FL

RECEIVED

2024 JAN 26 AM 11:43
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Electronic Filing Menu Corporate Filing Menu Help



COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SHANTAE McDONALD: THE BEAUTAE BAR LLC
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:

Cheyenne Moseley

Name of Person

Legalzoom.com, Inc.

Firm/Company

101 N Brand Blvd 11th Fl

Address

Glendale, CA 91203

City/State and Zip Code

thebeautaebar@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cheyenne Moseley

800

773-0838

Name of Contact 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

Enclosed is a check for the following amount:

Please make check payable to: FLORIDA DEPARTMENT OF STATE

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☒ \$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 605 (402), FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. SHANTAE McDONALD: THE BEAUTAE BAR LLC

(Name of Foreign Limited Liability Company, must include "Limited Liability Company," "LLC," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "LLC," or "LLC.")

2. New York

(Jurisdiction under the law of which foreign limited liability company is organized)

3. _____

(FEI number, if applicable)

4. _____

(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. _____

(Street Address of Principal Office)

285 Nostrand Avenue, Unit 122

Brooklyn, NY 11216

6. _____

(Mailing Address)

285 Nostrand Avenue, Unit 122

Brooklyn, NY 11216

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Shantae McDonald

Office Address: 10856 SW 104 Street, Suite 110

Miami

(City)

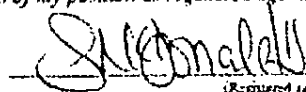
Florida

33176

(Zip code)

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.



(Registered agent's signature)

Shantae McDonald

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2024 JAN 26 PM 4:15
SECRETARY OF STATE
TALLAHASSEE, FL

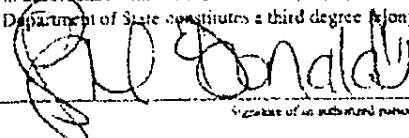
8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage (up to six (6) total):

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
☒ Manager	Name: Shantae McDonald	☐ Manager	Name: _____
☐ Member	Address: _____	☐ Member	Address: _____
☐ Authorized	11201 SW 17th Street	☐ Authorized	_____
Person	Miami, FL 33174	Person	_____
☐ Other _____	☐ Other _____	☐ Other _____	☐ Other _____
☐ Manager	Name: _____	☐ Manager	Name: _____
☐ Member	Address: _____	☐ Member	Address: _____
☐ Authorized	_____	☐ Authorized	_____
Person	_____	Person	_____
☐ Other _____	☐ Other _____	☐ Other _____	☐ 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 exempted in accordance with section 605.0103 (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 s. 817.155, F.S.



Signature of an authorized person
Shantae McDonald

Typed or printed name of signer

New York State Department of State
Division of Corporations, State Records and Uniform Commercial Code
COPY REQUEST/CERTIFICATE OF STATUS RECEIPT

LEGALZOOM.COM, INC.
101 N BRAND BLVD
11TH FLOOR
GLENDALE CA 91203

DATE: 01/25/2024 **TRANSACTION NUMBER:** 202401250004229

ENTITY INFORMATION:

ENTITY NAME: SHANTAE MCDONALD: THE BEAUTAE BAR LLC
DOS ID: 6289573
DATE OF INITIAL DOS FILING: 09/27/2021

<u>REQUESTED SERVICES:</u>	<u>NUMBER REQUESTED:</u>	<u>FEE:</u>
UNCERTIFIED COPY(\$5.00)		\$0.00
CERTIFIED COPY(\$10.00)		\$0.00
CERTIFICATE OF STATUS - SHORT FORM(\$25.00)	1	\$25.00
CERTIFICATE OF STATUS - LONG FORM(\$25.00)		\$0.00
EXPEDITED HANDLING		\$0.00

TOTAL PAYMENTS RECEIVED: \$25.00
CASH: \$0.00
CHECK/MONEY ORDER: \$0.00
CREDIT CARD: \$0.00
DRAWDOWN ACCOUNT: \$25.00
REFUND DUE: \$0.00

<u>REQUESTED COPY</u>	<u>FILE DATE</u>	<u>FILE NUMBER</u>
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STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

I, ROBERT J. RODRIGUEZ, Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

Entity Name: SHANTAE McDONALD: THE BEAUTAE BAR LLC
DOS ID Number: 6289573
Entity Type: DOMESTIC LIMITED LIABILITY COMPANY
Entity Status: EXISTING
Date of Initial Filing with DOS: 09/27/2021

Statement Status: CURRENT
Statement Due Date: 09/30/2025

No information is available from this office regarding the financial condition, business activity or practices of this entity.



WITNESS my hand and official seal of the Department of State,
at the City of Albany, on January 25, 2024 at 05:23 P.M.

ROBERT J. RODRIGUEZ, Secretary of State

By Brendan C. Hughes
Executive Deputy Secretary of State