

Filed
Secretary of State
State of Washington
Date Filed: 02/29/2024
Effective Date: 02/29/2024
UBI #: 605 432 387

CERTIFICATE OF FORMATION

UBI NUMBER							
UBI Number: 605 432 387							
BUSINESS NAME							
Business Name IAO BEAUTY LLO							
REGISTERED AG	ENT <u>RCW 23.95.410</u>						
Registered Agent Name	Street Address	Mailing Address					
PAIGE YATES	7ATES 5614 176TH ST E STE B103 # 1009, PUYALLUP, WA, 98375-9303, UNITED STATES 5614 176TH ST E STE B103 # 1009, PUYALLUP, WA 98375-9303, UNITED STATES						
REGISTERED AG	ENT CONSENT						
Customer provided	Registered Agent consent? * - Yes						
DURATION							
Duration: PERPETUAL							
EFFECTIVE DATE	•						
Effective Date: 02/29/2024							
OTHER PROVISION	DNS						
Other Provisions:							
PRINCIPAL OFFIC	CE CONTRACTOR OF THE CONTRACTO						
Phone:							
Email: MARC@RAYNER	CPA.COM						

Street Address:

5614 176TH ST E STE B103 # 1009, PUYALLUP, WA, 98375-9303, UNITED STATES

Mailing Address:

5614 176TH ST E STE B103 # 1009, PUYALLUP, WA, 98375-9303, UNITED STATES

EXECUTOR

Title	Executor Type	Entity Name	First Name	Last Name	Address		
EXECUTOR	INDIVIDUAL		T-AGE	WILLIAMS	515 W 38TH ST APT 18D, NEW YORK, NY, 10018-1250, UNITED STATES		
EXECUTOR	INDIVIDUAL		PAIGE	YATES	5614 176TH ST E STE B103 # 1009, PUYALLUP, WA, 98375-9303, UNITED STATES		
RETURN ADDRESS FOR THIS FILING							
Attention:							
Email: ORDERS@INTERSTATEFILINGS.COM Address:							
UPLOAD ADDITIONAL DOCUMENTS							
Name			Document 7	Гуре			
No Value Fou	nd.						
UPLOADED DOCUMENTS							
Document Ty	pe		Source		Created By Created Date		
No Value Fou	nd.						
EMAIL OPT-I	N						
I hereby opt into receiving all notifications from the Secretary of State for this entity via email only. I acknowledge that I will no longer receive paper notifications.							
AUTHORIZED PERSON - STAFF CONSOLE							
Document is signed.							
Person Type: ENTITY							
First Name: MARC							
Last Name: RAYNER							
Entity Name: RAYNER CP.	A PLLC						
Title:							