

LLC-12NC

21-D12570

FILED

In the office of the Secretary of State of the State of California

JUN 23, 2021

be used only if a complete Statement of Information has been filed previously and there has been no change.

IMPORTANT — Read instructions before completing this form. This form may

Filing Fee - \$20.00

Copy Fee - \$1.00;

Certification Fee - \$5.00 plus copy fee

This Space For Office Use Only

3. State, Foreign Country or Place of Organization (only if formed

Valley of the Sun Cosmetics, LLC

Signature

1. Limited Liability Company Name (Enter the exact name of the LLC as it is recorded with the California Secretary of State. Note: If you registered in California using an alternate name, see instructions.)

VALLEY OF THE SUN COSMETICS, LLC

2. 12-Digit Secretary of State File Number

| | | outside of California) | | | | | | | |
|----|---|----------------------------------|--|--|--|--|--|--|--|
| | 200317110067 | CALIFORNIA | | | | | | | |
| 4. | No Change Statement (Do not alter the No Change Statement. If there has been any change, please complete a Statement of Information (Form LLC-12).) | | | | | | | | |
| | There has been no change in any of the information contained in the previous complete Statement of Information filed with the California Secretary of State. | | | | | | | | |
| 5. | The information contained herein is true and | correct. | | | | | | | |
| 06 | 6/23/2021 AJMAL Shehzad | Valley of the Sun Cosmetics, LLC | | | | | | | |

Return Address (Optional) (For communication from the Secretary of State related to this document, or if purchasing a copy of the filed document, enter the name of a person or company and the mailing address. This information will become public when filed. (SEE INSTRUCTIONS BEFORE COMPLETING.)

Title

| Name: | Γ | | | _ |
|-----------------|---|--|--|---|
| Company: | | | | |
| Address: | | | | |
| City/State/Zip: | | | | |

Type or Print Name of Person Completing the Form

Date