

STATE OF NEVADA**FRANCISCO V. AGUILAR***Secretary of State***C. MURPHY HEBERT**
*Chief Deputy Secretary of State***DEANNA L. REYNOLDS**
*Deputy Secretary for Commercial Recordings***OFFICE OF THE
SECRETARY OF STATE**James Lloyd
29322 Clipper Way
Laguna Niguel, CA 92677, USA**Work Order #:** W2026012101639
January 21, 2026
Receipt Version: 1**Special Handling Instructions:****Submitter ID:** 975356**Charges**

Description	Fee Description	Filing Number	Filing Date/Time	Filing Status	Qty	Price	Amount
Certificate of Reinstatement 3/2026	Fees	20265459744	1/21/2026 1:57:50 PM	Approved	1	\$300.00	\$300.00
Certificate of Reinstatement 3/2023-3/2026	Business License Fee	20265459744	1/21/2026 1:57:50 PM	Approved	4	\$800.00	\$800.00
Certificate of Reinstatement 3/2023-3/2025	Business License Late Fee	20265459744	1/21/2026 1:57:50 PM	Approved	3	\$300.00	\$300.00
Certificate of Reinstatement 3/2023-3/2026	Annual List Fee	20265459744	1/21/2026 1:57:50 PM	Approved	4	\$600.00	\$600.00
Certificate of Reinstatement 3/2023-3/2025	Annual List Late Fee	20265459744	1/21/2026 1:57:50 PM	Approved	3	\$225.00	\$225.00
Certificate of Reinstatement 3/2026	RA Change Fee	20265459744	1/21/2026 1:57:50 PM	Approved	1	\$60.00	\$60.00
Total							\$2285.00

Payments

Type	Description	Payment Status	Amount
Credit Card	7690326580806920603078	Success	\$2285.00
Credit Card	Service Fee	Success	\$57.13
Total			\$2342.13

Credit Balance: \$0.00James Lloyd
29322 Clipper Way
Laguna Niguel, CA 92677, USA

STATE OF NEVADA

FRANCISCO V. AGUILAR

Secretary of State



C. MURPHY HEBERT
Chief Deputy Secretary of State

DEANNA L. REYNOLDS
Deputy Secretary for Commercial Recordings

**OFFICE OF THE
SECRETARY OF STATE**

Business Entity - Filing Acknowledgement

01/21/2026

Work Order Item Number: W2026012101639 - 4986732
Filing Number: 20265459744
Filing Type: Certificate of Reinstatement
Filing Date/Time: 01/21/2026 13:57:50 PM
Filing Page(s):

Indexed Entity Information:

Entity ID: E21864542022-0

Entity Name: BeautySecret International
LLC

Entity Status: Active

Expiration Date: None

Commercial Registered Agent

MARC GOHRES*

10409 PACIFIC PALISADES AVE, Las Vegas, NV 89144, USA

The attached document(s) were filed with the Nevada Secretary of State, Commercial Recording Division. The filing date and time have been affixed to each document, indicating the date and time of filing. A filing number is also affixed and can be used to reference this document in the future.

Respectfully,

A handwritten signature in black ink that reads "FV Aguilar".

FRANCISCO V. AGUILAR
Secretary of State



FRANCISCO V. AGUILAR
Secretary of State
401 North Carson Street
Carson City, Nevada 89701-4201
(775) 684-5708
Website: www.nvsos.gov
www.nvsilverflume.gov

Filed in the Office of <i>FV Aguilar</i> Secretary of State State Of Nevada	Business Number E21864542022-0
	Filing Number 20265459744
	Filed On 01/21/2026 13:57:50 PM
	Number of Pages 5

Certificate of Reinstatement/Revival

NRS 78, 78A, 80, 81, 82, 84, 86, 87, 87A, 88, 88A and 89

☒ Reinstatement

☐ Revival

1. Entity information:

Name of entity as on file with the Nevada Secretary of State:

BeautySecret International LLC

Entity or Nevada Business Identification Number (NVID): **NV20222402744**

2. Registered Agent for Service

of Process: (check only one box)

☒ Commercial Registered Agent (name only below) ☐ Noncommercial Registered Agent (name and address below) ☐ Office or position with Entity (title and address below)

MARC GOHRES*

Name of Registered Agent OR Title of Office or Position with Entity

10409 PACIFIC PALISADES AVE

Las Vegas

Nevada **89144**

Street Address

City

Zip Code

Mailing Address (If different from street address)

City

Nevada Zip Code

I hereby accept appointment as Registered Agent for the above named Entity. If the registered agent is unable to sign the Articles of Incorporation, submit a separate signed Registered Agent Acceptance form.

X

Authorized Signature of Registered Agent or On Behalf of Registered Agent Entity

Date

3. Date When Revival is to Commence:

Date when revival of charter is to commence or be effective, which may be before the date of the certificate: **01/21/2026**

4. Duration of Revival:

(A date is required for entities under NRS 88)

Indicate whether or not the revival is to be perpetual, and, if not perpetual, the time for which the revival is to continue. Limited Partnership under NRS 88 must indicate a date.
The corporation's existence shall be: PERPETUAL or

5. Current List :

Reinstatements:
List of Officers,
Managers,
Managing Members,
General Partners,
Managing Partners, Trustee or
Subscribers

Revivals:
List of Officers,
Managers,
Managing Members,
General Partners,
Managing Partners
or Trustee

CORPORATION, INDICATE THE Managing Member, OR EQUIVALENT OF: Title: **Managing Member**

James Lloyd

USA

Name

Country

29322 Clipper Way

Laguna Niguel

CA 92677

Address

City

State Zip/Postal Code



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Certificate of Reinstatement/Revival

NRS 78, 78A, 80, 81, 82, 84, 86, 87, 87A, 88, 88A and 89

☒ Reinstatement

☐ Revival

6. Statement of Fact:
(Revivals only, select one. Entities under NRS 84 cannot revive)

☐ Revival pursuant to 78.730 or 81.010: (check one)

The undersigned declare that the corporation desires to revive its corporate charter and is, or has been, organized and carrying on the business authorized by its existing or original charter and amendments thereto, and desires to continue through revival its existence pursuant to and subject to the provisions of Chapters 78 and/or 81.

☐ The undersigned declare that they have obtained written consent of the stockholders of the corporation holding at least a majority of the voting power and that this consent was secured; furthermore, that they are the person(s) designated or appointed by the stockholders of the corporation to revive the corporation.

☐ The undersigned declare that they are the person(s) who have been designated by a majority of the directors in office to sign this certificate and that no stock has been issued. Membership approval not required under NRS 81.010(2).

☐ Revival pursuant to 80:

The undersigned declare that the corporation desires to revive its qualification to do business and is, or has been, organized and carrying on the business authorized by its existing or original qualification and amendments thereto, and desires to continue through revival its existence pursuant to and subject to the provisions of Chapter 80.

☐ The undersigned declare that they have obtained written consent of the stockholders of the corporation holding at least a majority of the voting power and that this consent was secured; furthermore, that they are the person(s) designated or appointed by the stockholders of the corporation to revive the qualification.

☐ The undersigned declare that they are the person(s) who have been designated by a majority of the directors in office to sign this certificate and that no stock has been issued.

☐ Revival pursuant to 82:

The undersigned declare that the corporation desires to revive its corporate charter and is, or has been, organized and carrying on the business authorized by its existing or original charter and amendments thereto, and desires to continue through revival its existence pursuant to and subject to the provisions of Chapters 81 and 82.

This certificate must be executed by the President or Vice President **AND** Secretary or Assistant Secretary.

The undersigned declare that the execution and filing of this certificate has been approved unanimously by the last-appointed surviving directors of the corporation and the unanimous consent has been secured:



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Secretary of State
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Certificate of Reinstatement/Revival

NRS 78, 78A, 80, 81, 82, 84, 86, 87, 87A, 88, 88A and 89



Reinstatement



Revival

6. Statement of Fact:
(Revivals only, select one. Entities under NRS 84 cannot revive)



Revival pursuant to 86.580:

The undersigned declare that the limited-liability company desires to revive its charter and is, or has been, organized and carrying on the business authorized by its existing or original charter and amendments thereto, and desires to continue through revival its existence pursuant to and subject to the provisions of Chapter 86.

The undersigned declares that he has been designated or appointed by the members to sign this certificate. Furthermore, the execution and filing of this certificate has been approved and secured by the written consent of a majority of the members.



Revival pursuant to 86:

The undersigned declare that the foreign limited-liability company desires to revive its registration and is, or has been, organized and carrying on the business authorized by its existing or original registration and amendments thereto, and desires to continue through revival its existence pursuant to and subject to the provisions of NRS 86.5467.

The undersigned declares that he/she has obtained approval by written consent of the majority in interest and that this consent was secured.



Revival pursuant to 87, 87A, 88 or 88A:

The undersigned declare that the limited partnership, limited-liability partnership, limited-liability limited partnership or business trust desires to revive its certificate and is, or has been, organized and carrying on the business authorized by its existing or original certificate and amendments thereto, and desires to continue through revival its existence pursuant to and subject to the provisions of Chapter 87, 87A, 88 or 88A

The undersigned declares that he/she has been designated or appointed by the general partners, managing partners or trustees to sign this certificate. Furthermore, the execution and filing of this certificate has been approved and secured by the written consent of the general partners or managing partners holding at least a majority of the voting powers.



Revival pursuant to 89:

The undersigned declare that the professional association desires to revive its articles of association and is, or has been, organized and carrying on the business authorized by its existing or original articles of association and amendments thereto, and desires to continue through revival its existence pursuant to and subject to the provisions of Chapter 89.

The undersigned declares that he/she has been designated or appointed by the members to sign this certificate. Furthermore, the execution and filing of this certificate has been approved and secured by the written consent of the holders of a membership interest in the professional association holding at least a majority of voting power.

7. Signatures:
(Required)

I declare under the penalty of perjury that the reinstatement/revival has been authorized by a court of competent jurisdiction or by the duly selected manager or managers of the entity or if the entity has no managers, its managing members.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

X

James Lloyd

Signature of Officer, Manager, Managing Member,
General Partner, Managing Partner, Trustee, or
Authorized Signer

Member

Title

01/21/2026

Date

FORM WILL BE RETURNED IF UNSIGNED.



FRANCISCO V. AGUILAR
Secretary of State
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Carson City, Nevada 89701-4201
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Filed in the Office of	Business Number
<i>FVAguilar</i>	E21864542022-0
Secretary of State	Filing Number
State Of Nevada	20265459744
	Filed On
	01/21/2026 13:57:50 PM
	Number of Pages
	5

Application for Reinstatement or Revival:

NRS 78.185, 80.175, 82.5239, 86.278, 87.455, 87A185, 88.327, 88A.660

Form for use ONLY if name is unavailable when reinstating or reviving.

TYPE OR PRINT - USE DARK INK ONLY - DO NOT HIGH LIGHT

INSTRUCTIONS:

- 1.ENTITY INFORMATION:** Enter the current name of the entity exactly as filed with the Secretary of State; Enter the Entity Number or Nevada Business Identification Number (NVID).
- 2.PURPOSED NAME:** Enter the name the entity desires to reinstate or revive under. The name must include the appropriate corporate ending if applicable.
- 3.SIGNATURE(S):** Must include the Authorized Signature for entity type. Form will be returned if unsigned.

1. Entity Information :	Name of entity as on file with the Nevada Secretary of State:							
	Entity or Nevada Business Identification Number (NVID): NV20222402744							
2.Purposed Name: (Must include appropriate corporate ended if applicable)	The name under which it desires the existence to be reinstated or revived: BeautySecret International LLC							
3.Signature* : (Required)	<table><tr><td>Title</td><td>Name</td><td>Date</td></tr><tr><td>Member</td><td>James Lloyd</td><td>1/20/2026 3:26:58 PM</td></tr></table> <p>If a Corporation, this application shall be signed by an officer. If a Limited-Liability Company, this application shall be signed by a Manager or Managing Member. If a Limited-Liability Partnership, this application shall be signed by a Managing Partner. If a Limited Partnership or Limited-Liability Limited Partnership, this application shall be signed by a General Partner. If a Business Trust, this application shall be signed by a Trustee.</p>		Title	Name	Date	Member	James Lloyd	1/20/2026 3:26:58 PM
Title	Name	Date						
Member	James Lloyd	1/20/2026 3:26:58 PM						





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Registered Agent Acceptance/Statement of Change

(PURSUANT TO NRS 77.310, 77.340, 77.350, 77.380)

TYPE OR PRINT - USE DARK INK ONLY - DO NOT HIGHLIGHT

1. Entity information:	Name of represented entity: <input type="text" value="Beauty Secret International LLC"/> Entity or Nevada Business Identification Number (NVID): (for entities currently on file) <input type="text" value="E21864542022-0"/>
2. Registered Agent Acceptance:	<input checked="" type="checkbox"/> Registered Agent Acceptance
3. Information Being Changed:	Statement of Change takes the following effect: (select only one) <input checked="" type="checkbox"/> Appoints New Agent (complete section 5) <input type="checkbox"/> Update Represented Entity Acting as Registered Agent (complete sections 5) <input type="checkbox"/> Update Registered Agent Name (complete sections 4 & 5) <input type="checkbox"/> Update Registered Agent Address (complete sections 4 & 5)
4. Registered Agent Information Before the Change: (Non-commercial registered agents ONLY)	<input type="text"/> Name of Registered Agent OR Title of Office or Position with Entity <input type="text"/> Nevada <input type="text"/> Street Address City Zip Code <input type="text"/> Nevada <input type="text"/> Mailing Address (if different from street address) City Zip Code
5. Newly Appointed Registered Agent or Registered Agent Information After the Change:	<input checked="" type="checkbox"/> Commercial Registered Agent:(name only below) <input type="checkbox"/> Noncommercial Registered Agent (name and address below) <input type="checkbox"/> Office or Position with Entity (title or position and address below) <input type="text" value="Marc Gohres"/> Name of Registered Agent OR Title of Office or Position within Entity <input type="text"/> Nevada <input type="text"/> Street Address City Zip Code <input type="text"/> Nevada <input type="text"/> Mailing Address (if different from street address) City Zip Code
6. Electronic Notification: (Optional)	Email address for electronic notifications for "Non-Commercial" or "Office or Positions with Entity" registered agents only: <input type="text"/>
7. Certificate of Acceptance of Appointment of Registered Agent: (Required)	<p><i>I hereby accept appointment as Registered Agent for the above named Entity.</i></p> <p><input checked="" type="checkbox"/>  Digitally signed by Marc Gohres DN: cn=Marc Gohres, o=Nevada Registered Agent Service, ou=Commercial Registered Agent, email=raservices@nevada-ra.com, c=US Date: 2026.01.21 10:25:44 -08'00' Adobe Acrobat version: 2020.006.20042 <input type="text" value="01/21/2026"/> Authorized Signature of Registered Agent or On Behalf of Registered Agent Entity Date</p>
8. Signature of Represented Entity: (Required)	<p><input checked="" type="checkbox"/>  <input type="text" value="Jame Lloyd (Jan 21, 2026 11:14:00 PST)"/> <input type="text" value="1/21/26"/> Authorized Signature On Behalf of the Entity Date</p>

FEE: \$60.00

This form must be accompanied by appropriate fees.





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Registered Agent Acceptance/Statement of Change

(PURSUANT TO NRS 77.310, 77.340, 77.350, 77.380)

TYPE OR PRINT - USE DARK INK ONLY - DO NOT HIGHLIGHT

1. Entity information:	Name of represented entity: <input type="text" value="Beauty Secret International LLC"/> Entity or Nevada Business Identification Number (NVID): (for entities currently on file) <input type="text" value="E21864542022-0"/>
2. Registered Agent Acceptance:	<input checked="" type="checkbox"/> Registered Agent Acceptance
3. Information Being Changed:	Statement of Change takes the following effect: (select only one) <input checked="" type="checkbox"/> Appoints New Agent (complete section 5) <input type="checkbox"/> Update Represented Entity Acting as Registered Agent (complete sections 5) <input type="checkbox"/> Update Registered Agent Name (complete sections 4 & 5) <input type="checkbox"/> Update Registered Agent Address (complete sections 4 & 5)
4. Registered Agent Information Before the Change: (Non-commercial registered agents ONLY)	<input type="text"/> Name of Registered Agent OR Title of Office or Position with Entity <input type="text"/> Nevada <input type="text"/> Street Address City Zip Code <input type="text"/> Nevada <input type="text"/> Mailing Address (if different from street address) City Zip Code
5. Newly Appointed Registered Agent or Registered Agent Information After the Change:	<input checked="" type="checkbox"/> Commercial Registered Agent:(name only below) <input type="checkbox"/> Noncommercial Registered Agent (name and address below) <input type="checkbox"/> Office or Position with Entity (title or position and address below) <input type="text" value="Marc Gohres"/> Name of Registered Agent OR Title of Office or Position within Entity <input type="text"/> Nevada <input type="text"/> Street Address City Zip Code <input type="text"/> Nevada <input type="text"/> Mailing Address (if different from street address) City Zip Code
6. Electronic Notification: (Optional)	Email address for electronic notifications for "Non-Commercial" or "Office or Positions with Entity" registered agents only: <input type="text"/>
7. Certificate of Acceptance of Appointment of Registered Agent: (Required)	<p><i>I hereby accept appointment as Registered Agent for the above named Entity.</i></p> <p><input checked="" type="checkbox"/>  Digitally signed by Marc Gohres DN: cn=Marc Gohres, o=Nevada Registered Agent Service, ou=Commercial Registered Agent, email=raservices@nevada-ra.com, c=US Date: 2026.01.21 10:25:44 -08'00' Adobe Acrobat version: 2020.006.20042 <input type="text" value="01/21/2026"/> Authorized Signature of Registered Agent or On Behalf of Registered Agent Entity Date</p>
8. Signature of Represented Entity: (Required)	<p><input checked="" type="checkbox"/>  <input type="text" value="Jame Lloyd (Jan 21, 2026 11:14:00 PST)"/> <input type="text" value="1/21/26"/> Authorized Signature On Behalf of the Entity Date</p>

FEE: \$60.00

This form must be accompanied by appropriate fees.

SECRETARY OF STATE



NEVADA STATE BUSINESS LICENSE

BeautySecret International LLC

Nevada Business Identification # NV20222402744

Expiration Date: 03/31/2027

In accordance with Title 7 of Nevada Revised Statutes, pursuant to proper application duly filed and payment of appropriate prescribed fees, the above named is hereby granted a Nevada State Business License for business activities conducted within the State of Nevada.

Valid until the expiration date listed unless suspended, revoked or cancelled in accordance with the provisions in Nevada Revised Statutes. License is not transferable and is not in lieu of any local business license, permit or registration.

License must be cancelled on or before its expiration date if business activity ceases. Failure to do so will result in late fees or penalties which, by law, cannot be waived.



Certificate Number: B202601216431340

You may verify this certificate
online at <https://www.nvsilverflume.gov/home>

IN WITNESS WHEREOF, I have hereunto set my
hand and affixed the Great Seal of State, at my
office on 01/21/2026.

FVAguilar

FRANCISCO V. AGUILAR
Secretary of State