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2011 SEP 19 BM 12:56
SECRETARY OF STATE
AND ANASSEE, FLORIDA

C. LEWIS

SEP 2 0 2011

EXAMINER

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: Itty Bi	tty Swimmers, Ll	LC
50 502 01.		ited Liability Company
The enclosed Articles o	f Organization and fee(s) are	e submitted for filing.
Please return all corresp	ondence concerning this mat	tter to the following:
Elizabeth	Goldring	
		Name of Person
Itty Bitty S	Swimmers, LLC	
		Firm/Company
1340 SW	15th Street	
		Address
Boca Rator	n, FL 33486	
		ity/State and Zip Code
brad@terra	castproducts.com	for future annual report notification)
For further information	concerning this matter, please	se call:
Brad Goldring		at (305) 8957600
Name	of Person	Area Code & Daytime Telephone Number
Enclosed is a check for	or the following amount:	·
✓ \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & \$160.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
Itty Bitty Swimmers, LLC
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
1340 SW 15th Street Boca Raton, FL 33486	Same as Principal Office

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Bradley Goldring Name

12700 Biscayne Blvd Suite 206

FL 33181 City, State, and Zip North Miami

Florida street address (P.O. Box NOT acceptable)

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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

s Signature (REQUIRED)

(CONTINUED) Page 1 of 2

FILED

ARTICLE IV- Manager(s) or Managing Member(s):

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	SECRETARY OF STATE TALLAHASSEE, FLORIDA
MGRM	Elizabeth Goldring 1340 SW 15th ST Boca Raton, FL 33486	<u>-</u>
MGRM	Bradley Goldring 1340 SW 15th ST	
	Boca Raton, FL 33486	
(Use attachment if necessary)		
ARTICLE V: Effective date, if other than (If an effective date is listed, the date mu to or 90 days after the date of filing.)	n the date of filing: ust be specific and cannot be more	. (OPTIONAL) than five business days prior
REQUIRED SIGNATURE:) Whis	

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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 a member or an authorized representative of a member.

Brad Goldring

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)