

L03000023625



Rami & Shelly Asayag
2657 NE 164th St
N Miami Beach, FL 33160-4011

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

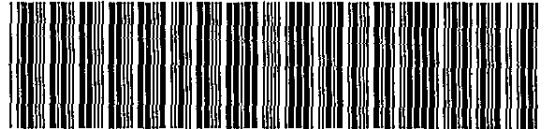
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06/26/03--01003--018 **25.00

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TALLAHASSEE, FLORIDA

W03-1732
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FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

June 17, 2003

RAMI & SHELLY ASAYAG
2657 NE 164TH ST.
N. MIAMI BEACH, FL 33160-4011

SUBJECT: SPORTY BABY, LC
Ref. Number: W03000017327

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TALLAHASSEE, FLORIDA

We have received your document for SPORTY BABY, LC and your check(s) totaling \$100.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

There is a balance due of \$25.00.

The document must contain both the street address of the principal office and the mailing address of the entity.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan
Document Specialist

Letter Number: 303A00037342

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Sporty Baby LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

550 Biltmore Way #209 Coral Gables, FL 33134

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

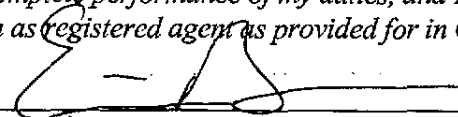
Eric Baron
Name

550 BILTMORE WAY #209
Florida street address (P.O. Box **NOT** acceptable)

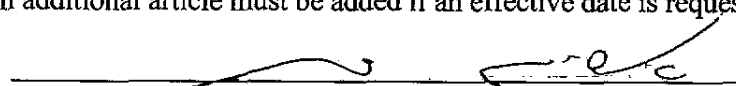
CORAL GABLES FL 33134
City, State, and Zip

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TALLAHASSEE, FLORIDA

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.


Registered Agent's Signature

(An additional article must be added if an effective date is requested)


Signature of a member or an authorized representative of a member.

(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.)

Rami Z. Asayag
Typed or printed name of signer

Filing Fees:

- \$100.00 Filing Fee for Articles of Organization
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)