L07000108841

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	· #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
Special Instructions to	Filing Officer:	

Office Use Only



300110459183

10/10/07--01048--010 **125.00

SECRETARY OF STATE DIVISION OF CORPORATIONS

120,20 He

COVER LETTER

. TO: Registration Se Division of Cor			
SUBJECT: Unique	Dolls n Teddys LLC	1 Liability Company)	
	(1 mile of Diffice	District Company)	
The enclosed Articles of	f Organization and fee(s) are so	ubmitted for filing.	
Please return all corresp	ondence concerning this matte	r to the following:	
Chad M. B	urns		
	O	Name of Person)	
Unique Dol	ls n Teddys LLC		
	(Firm/Company)	
PO Box 60	034		
		(Address)	
Brandon,			
	(City	(State and Zip Code)	
For further information	concerning this matter, please	call:	
Chad M. Burns		at (813) 643-278	9
(Name	of Person)	(Area Code & Daytime T	elephone 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 & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & 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 Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 11, 2007

CHAD M BURNS P O BOX 6034 BRADON, FL 33508

SUBJECT: UNIQUE DOLLS N TEDDYS LLC

Ref. Number: W07000050467

We have received your document for UNIQUE DOLLS N TEDDYS LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

Please return the corrected original and one copy of 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) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 507A00059910

97 OCT 26 PM 4: 1

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	:		
The name of the Limit	ted Liability Company is:		
Unique Della a Toddw	0110		
Unique Dolls n Teddys (Must end with the words "Li		Company" or their abbreviation "LLC," or "L.C.,")	
		• •	
ARTICLE II - Addr		ncipal office of the Limited Liability Company	, ic.
The maining address a	ulu street address of the prin	icipal office of the Emilied Liability Company	15.
Principal Office Add	lress:	Mailing Address:	
POBUL 6034 302)	/ellow Birch Loop	PO Box 6034	
	3511	Brandon, FL 33508	
	rida street address of the re	gistered agent are:	
30	2 Yellow Birch Loop	(DO D. NOT	
	Florida street addr	ess (P.O. Box NOT acceptable)	
Br	andon	FL 33511	
	City, State, ar	d Zip	
liability company of registered agent and of statutes relating to t	at the place designated in th agree to act in this capacity the proper and complete per	ccept service of process for the above stated limits certificate, I hereby accept the appointment as I further agree to comply with the provisions of formance of my duties, and I am familiar with a	s of all nd
accept the obligat	ions of my position as regist	ered agent as provided for in Chapter 608, F.S	,
	Chul M Br		0
_	Registered Agent's Signatu	re (REQUIRED)	<u>S</u> g

(CONTINUED)
Page 1 of 2

SECRETARY OF STATE
DIVISION OF CORPORATIONS

07 OF 1 25 PM 1: 15

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

The name and address of each Manager or Managing Member is as follows:

Title:	Name and Address:	
"MGR" = Manage		
"MGRM" = Mana	ing Member	
MGR	Chad M. Burns	
	302 Yellow Birch Loop	
	Brandon, FL 33508	
MGRM	Sherri L. Burns	
	302 Yellow Birch Loop	
	Brandon, FL 33508	
MGRM	Vikki L. Ebbeling	
	3339 Foster Chapel Road	
	Columbia, TN 38401	
MGRM	Sidney H. Ebbeling	
	3339 Foster Chapel Road	
	Columbia, TN 38401	
	e, if other than the date of filing: (OPTIONAL)	• • • •
to or 90 days after the dat	l, the date must be specific and cannot be more than five business days pr of filing.)	ЮГ
REQUIRED SIG	ATURE:	
	gnature of a member or an authorized representative of a member.	
	n accordance with section 608.408(3), Florida Statutes, the execution f this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)	
	Chad M. Burns	
	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)