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(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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Special Instructions to Filing Officer:
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COVER LETTER

TO: Registration S Division of Co			
_{subject:} Baby (Girl Products		
	(Name of Limi	ted Liability Company)	•
The enclosed Articles o	f Organization and fee(s) are	submitted for filing.	
Please return all corresp	condence concerning this ma	tter to the following:	
Sarapage	Bauguss		
		(Name of Person)	
Baby Girl	Products		
		(Firm/Company)	
6043 Des	ert Peace Ave		
		(Address)	
Land O La	akes, FL 34639		
	(Ci	ity/State and Zip Code)	
For further information	concerning this matter, pleas	se call:	
Sarapage Bau	guss	_at (813) 391-1127	
(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	S155.00 Filing Fee & S160.00 Filing F Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	itus &
	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:	:	
Baby Girl Products LLC		
(Must end with the words "Limited Liabil	lity Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the pr	rincipal office of the Limited Liabi	lity Company is:
Principal Office Address:	Mailing Address:	
6249 Ashbury Palms Dr	6043 Desert Peace Ave	
Tampa, FL 33647	Land O Lakes, FL 34639	_
ARTICLE III - Registered Agent, Registered The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.) The name and the Florida street address of the r Sarapage Bauguss Name	stered Agent. You must designate an individua	OS APR 18 SECRETAR TALLAHASS
6043 Desert Peace	dress (P.O. Box NOT acceptable)	FFS 5
Land O Lakes, FL 34	4639	AM IO: 32 EE 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 (REQUIRED)

(CONTINUED)
Page 1 of 2

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Me	Name and Address:
MGR	Sarapage Bauguss
	6043 Desert Peace Ave
	Land O Lakes, FL 34639
MGR	Teresa Arrighi
	6249 Ashbury Palms Dr
	Tampa, FL 33647
	that the same of t
(Use attachment if necessar	rv)
	er than the date of filing: April 15, 2008 (OPTIONAL) ate must be specific and cannot be more than five business days prig.)
REQUIRED SIGNATUR	E:
Signature	of a member of an authorized representative of a member. ance with section 608.408(3), Florida Statutes, the execution ument constitutes an affirmation under the penalties of perjury
_	ance with section 608.408(3), Florida Statutes, the execution
of this doc	ument constitutes an affirmation under the penalties of perjury facts stated herein are true.)

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)

Sarapage Bauguss

Typed or printed name of signee