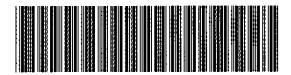
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ALLAHASSEE, FLORIDA

B. KOHR

JUL - 3 2008

EXAMINER

Amanda Roath

From: Sent:

To:

Amanda Haddan [ahaddan@cscinfo.com] Thursday, July 03, 2008 9:56 AM Amanda Roath

ACCOUNT NO. : 072100000032

REFERENCE :

63471

OS ULL S CH 2: 15

AUTHORIZATION :

COST LIMIT :

\$ 125.00

ORDER DATE : July 2, 2008

ORDER TIME : 9:55 AM

ORDER NO. : 634713-010

CUSTOMER NO:

4720431

DOMESTIC FILING

NAME:

LANE BRYANT #6617, LLC

XXARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Amanda Roath - EXT. 2955

EXAMINER'S INITIALS:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLES OF O	RGANIZATIC	IN FUR FL	OKIDA LIMITEL) LIABILII	Y COMPANY
ARTICLE I - Nar The name of the Li		Company is:			Y COMPANY FILED 7: 45
LANE BRYAN	T #6617, LL0				20
(Mı	ist end with the word	s "Limited Liabil	ity Company, "L.L.C.," or	·LLC.")	
ARTICLE II - Ad The mailing address		ress of the pi	incipal office of the	Limited Liab	ility Company
Principal Office A	ddress:		Mailing Address:		
450 WINKS LA	NE		3750 STATE R	OAD	
BENSALEM	PA	19020	BENSALEM	PA	19020
ARTICLE III - R (The Limited Liability Cobusiness entity with an	ompany cannot serve	as its own Regist	l Office, & Registere lered Agent. You must desig	ed Agent's S	ignature: ul or another
The name and the l	Florida street ad	dress of the r	egistered agent are:		
	Corporation	Service Co Name	mpany		
	1201 Hays S		ress (P.O. Box <u>NOT</u> acc	eptable)	
	Tallahassee		FL 32301	-	
		City, State, a	and Zip		

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..

Corporation Service Company

BY: Multiple Management (REQUIRED)

Registered Agent's Signature (REQUIRED)

Elizabeth R. Konieczny, Asst. VP

(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 Member	Name and Address:
MGR — Managing Meniber	LANE BRYANT, INC. 450 WINKS LANE BENSALEM, PA 19020
(Use attachment if necessary)	
LE V: Effective date, if other than the fective date is listed, the date must days after the date of filing.)	ne date of filing: (OPTION be specific and cannot be more than five business d
REQUIRED SIGNATURE:	

Signature of a member or an authorized epresentative 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.)

TINA LOUISE GRODZISKI

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)