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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

J. BRYAN

JAN 11 2011

**EXAMINER** 

## **COVER LETTER**

	ion Section of Corporations		
SUBJECT: All	Things Girlfriend, L	LC	
		ted Liability Company	<del> </del>
	les of Organization and fee(s) are		TALLAHASSEE. FLORI
	Baldwin		SSEE. PH 2
		Name of Person	7.05
All Thi	ngs Girlfriend, LLC		RIDA
		Firm/Company	
POB	ox 1466		·
		Address	
Quincy,	Florida 32353		
	Ci	ty/State and Zip Code	
jana@al	Ithingsgirlfriend.com		
	E-mail address: (to be used	for future annual report notification)	
For further informa	tion concerning this matter, pleas	se call:	
Jana Baldwin	l	_at (850) 545-7622	
N	lame of Person	Area Code & Daytime Telep	hone Number
	ck for the following amount:		<b>.</b>
<b>√</b> \$125.00 Filing Fee	\$\[ \] \$130.00 Filing Fee & Certificate of Status	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 Corporations Clifton Building 2661 Executive Center Clarations Tallahassee, FL 32301	ircle

## THO PROBLE ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	R	ΤI	CL	Æ	I	-	Name	::
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The name of the Limited Liability Company is:

## All Things Girlfriend, 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:	<u>Maning Address:</u>	
2875 Cooks Landing Rd.	P O Box 1466	
Quincy, Florida 32351	Quincy, Florida 32353	_
		_

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:

Jana Lee	e Baldwin
	Name
2875 C	Cooks Landing Rd.
	Florida street address (P.O. Box NOT acceptable)
Quincy	<sub>FL</sub> 32351
	City, State, 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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

"MGR" = Manager "MGRM" = Managing Member	Name and Address:
WORW — Wanaging Wenter	J.
MGRM	Jana Lee Baldwin
	2875 Cooks Landing
	Quincy, FI 32351
	<del></del>
•	e date of filing:(OPTIC
LE V: Effective date, if other than the fective date is listed, the date must be	e date of filing: (OPTIC be specific and cannot be more than five business
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LE V: Effective date, if other than the fective date is listed, the date must be days after the date of filing.)  REQUIRED SIGNATURE:	e date of filing: (OPTIO
LE V: Effective date, if other than the fective date is listed, the date must be days after the date of filing.)  REOUIRED SIGNATURE:  Signature of a memb  (In accordance with section 60 constitutes an affirmation under 1 am aware that any false information.)	pe specific and cannot be more than five business
LE V: Effective date, if other than the fective date is listed, the date must be days after the date of filing.)  REOUIRED SIGNATURE:  Signature of a memb  (In accordance with section 60 constitutes an affirmation under 1 am aware that any false information.)	er or an authorized representative of a member.  8.408(3), Florida Statutes, the execution of this document or the penalties of perjury that the facts stated herein are true mation submitted in a document to the Department of State by as provided for in s.817.155, F.S.)
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