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(Requestor's Name)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	-
(Business Entity Name)	<u> </u>
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	\neg
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2012 JAN 26 PM 2: 53 SECRETARY OF STATE

W12-2510

J. BRYAN

JAN 27 2012

EXAMINER

COVER LETTER

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TO: Registration Secti Division of Corpo						
_{SUBJECT:} Indigo K	ids LLC					
		ed Liability Compan	у		_	
The enclosed Articles of Org	ganization and fee(s) are	submitted for filing.				
Please return all corresponde	ence concerning this matt	ter to the following:				
Christopher	Baker					
		Name of Person			·	
				•	2012 SEI TALI	
		Firm/Company		<u>.</u>	DIZ JAN 26 SECRETARY ALLAHASS	
11731 NW 2	29th Place					
		Address	· · · · · · · · · · · · · · · · · · ·		PK	
Sunrise, FL 3	3323				PH 2: 5	
,	City	y/State and Zip Code				
the_real_life@	hotmail.com					
<u></u>	E-mail address: (to be used f	or future annual report	notification)	· · · · · · · · · · · · · · · · · · ·		
For further information conc	erning this matter, please	cail:				
Christopher Baker		at (303	668-9199		_	
Name of Pe	erson	Area Code &	ż Daytime Telep	hone Number		
Enclosed is a check for the	e following amount:					
	30.00 Filing Fee & Certificate of Status	\$155.00 Filing Certified Copy (additional copy i	,	\$160.00 Filing Certificate of S Certified Copy (additional copy is	Status &	
R D P	lailing Address egistration Section vivision of Corporations O. Box 6327 allahassee, FL 32314	Registration Division of Clifton Bui 2661 Exect	Corporations	rcle		



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 13, 2012

CHRISTOPHER BAKER 11731 NW 29TH PLACE SUNRISE, FL 33323

SUBJECT: INDIGO KIDS LLC Ref. Number: W12000002510



We have received your document for INDIGO KIDS 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):

The registered agent must sign accepting the designation.

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 Regulatory Specialist II

Letter Number: 512A00000982

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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

Mailing Address:

ARTICLE I The name of	- Name: the Limited Liability Company is:
Indigo K	ids LLC
	(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II	- Address:

Principal Office Address:

11731 NW 29th Place 11731 NW 29th Place Sunrise, FL 33323 Sunrise, FL 33323

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:

Christopher Baker
Name

11731 NW 29th Place

Florida street address (P.O. Box NOT acceptable)

Sunrise FL 33323
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

FILED

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

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

11731 NW 29th Place	
Sunrise, FL 33323	
Shana Budd	
2024 North Wildwood Lane	
Deerfield Beach, FL 33442	
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	 - <u></u> <u>-</u> <u>-</u> <u>-</u>
	HAS
	AR) SS
	E.F.S
	ORIDA
	2024 North Wildwood Lane Deerfield Beach, FL 33442

REQUIRED SIGNATURE:

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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

nana Budd 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)

Page 2 of 2