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(Re	questor's Name)	
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PiCK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to i	Filing Officer:	

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TILLES PER CONSTANT

COVER LETTER

	egistration Section ivision of Corporations	
SUBJECT	. World Bedding Broker,	LLC
	Name of	Limited Liability Company
The enclose	ed Articles of Organization and fee(s) are submitted for filing.
Please retui	rn all correspondence concerning this	s matter to the following:
	Joe K. Moore	
		Name of Person
	Joe K. Moore, Attorney	at Law
		Firm/Company
	One San Jose Place, Sui	te 17
		Address
	Jacksonville, Fl 32257	
		City/State and Zip Code
	WorldBeddingBroker@AOL.	
	E-mail address	: (to be used for future annual report notification)
For further	information concerning this matter, p	please call:
E	Earl Crawford	(_904)504-3802
	Name of Person	(904) 504–3802 Daytime Telephone Number
Enclosed is	a check for the following amount:	
\$125.00 Fil	sing Fee \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & S160.00 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 Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLES OF ORGANIZATION	N FOR FLORIDA LIMITED LIABILITY COM	PAINI
ARTICLE 1 - Name: The name of the Limited Liability Company is:		
World Bedding Broker, LLC		
	Limited Liability Company, "L.L.C.," or "L	LC.")
ARTICLE II - Address: The mailing address and street address of the prin	ncipal office of the Limited Liability Compa	iny is:
Principal Office Address:	Mailing Address:	
3018 Northwest County Rd 125 Lawtey, FI 32058	3018 Northwest County Lawtey, Fl 32058	7 Rd 125
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as another business entity with an active Florida region of the regio	its own Registered Agent. You must design gistration.) gistered agent are:	ate an individual or
	Name	
3018 Northwes	t County Rd 125	
	O. Box NOT acceptable)	
Lawtey	FL 32058	
City	Zip	
	y accept the appointment as registered agen wisions of all statutes relating to the proper of	nt and agree to act in this and complete performance
(CO	NTINUED)	SEGI I ALL
P	age I of 2	

Earl Crawford 3018 Northwest County Rd 125 Lawtey, Fl 32058 Denote if necessary) The date, if other than the date of filing: Listed, the date must be specific and cannot be more than five business days prior to or support to the date of a member or an authorized representative of a member. Signature of a member or an authorized representative of a member. (In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this docume 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.) Earl Crawford Typed or printed name of signee Filing Fees: ling Fee for Articles of Organization and Designation of Registered Agent	<u> Citle:</u>	Name and Address:
Earl Crawford 3018 Northwest County Rd 125 Lawtey, Fl 32058 Definition of the specific and cannot be more than five business days prior to or specific and cannot be more than five busines	AMBR" = Authorized Member	
and the date of filing: Signature of a member or an authorized representative of a member.	MGR" = Manager MGR	Farl Crawford
Lawtey, F1 32058 (OPTIONAL) Listed, the date must be specific and cannot be more than five business days prior to or operation of the second se	PKI	
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