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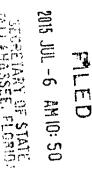
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Baby City Bike LLC Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Kristen Kozic
Name of Person
Baby City Bike UC
Firm/Company
7953 Hampton Lake Dr
Address
Tampa, FL 33647 City/State and Zip Code
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Alen Kozic at (813) 449-0572
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

Mailing Address

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street 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:					
(Must and w	Baby City B	ike LL(- W. I. C. 2 - WI I. C. 2)			
ARTICLE II - Address: The mailing address and street add						
-	Office Address:		Mailing Addre	<u>:ss</u> :		
7953 Hampt Tampa, FL	on Lake Or 33647		7953 Hampton 1 Tampa, FL 33			
ARTICLE III - Registered Agen (The Limited Liability Company c another business entity with an act The name and the Florida street ad daving been named as registered ag	annot serve as its own Regive Florida registration.) dress of the registered ager City	istered Agent. York are: Ch Kozi (ne Oton Lak D. Box NOT ac FL State	You must designate an indicate	GECRETARY OF STA	2015 JUL -6 AM 10: 50	FILED
taving been named as registered ag lace designated in this certificate, I urther agree to comply with the prov m familiar with and accept the oblig	hereby accept the appointing isions of all statutes relating ations of my position as re	ent as registere g to the proper gistered agent o	ed agent and agree to act in and complete performance	this capacity. of my duties, o	I	

(CONTINUED)
Page 1 of 2

	Authorized Member	Name and Address:
"MGR" = M <u>Kristen</u> MG	KOZIC	Kristen Kozic 7953 Hampton Lake Or Tanda, FL 33647
		
CLE V: Effecti effective date is	ent if necessary) /e date, if other than the date listed, the date must be sp	e of filing: (OPTIONAL) secific and cannot be more than five business days prior to or 90 days
CLE V: Effective date is ate of filing.) If the date inse	ve date, if other than the date listed, the date must be sp	necific and cannot be more than five business days prior to or 90 days meet the applicable statutory filing requirements, this date will not be li
ICLE V: Effective date is ate of filing.) If the date insecument's effect	ve date, if other than the date listed, the date must be sported in this block does not	pecific and cannot be more than five business days prior to or 90 days meet the applicable statutory filing requirements, this date will not be list
CLE V: Effective date is ate of filing.) If the date insecument's effect	ve date, if other than the date listed, the date must be sported in this block does not to date on the Department provisions, if any.	pecific and cannot be more than five business days prior to or 90 days meet the applicable statutory filing requirements, this date will not be li
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CLE V: Effective date is ate of filing.) If the date insecument's effect	re date, if other than the date listed, the date must be sported in this block does not live date on the Department provisions, if any. Signature of a m (In accordance with seconstitutes an affirmatic I am aware that any fals	meet the applicable statutory filing requirements, this date will not be lite of State's records. The most of an authorized representative of a member. The tion 605.0203 (1) (b), Florida Statutes, the execution of this document on under the penalties of perjury that the facts stated herein are true, the information submitted in a document to the Department of State.

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