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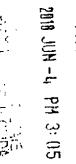
(Requestor's Name)			
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(City/State/Zip/Phone #)			
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PICK-UP WAIT MAIL			
(Business Entity Name)			
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(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

Office Use Only



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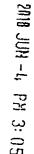
,	COVERLETTER			
	w Filing Section			
enn nere.	Trains, Accessories, Dolls and Such, LLC			
SUBJECT:Name of Limited Liability Company				
The enclose	d Articles of Organization and fee(s) are submitted for filing.			
Please retur	n all correspondence concerning this matter to the following:			
	Dolores Ann Russ			
	Name of Person			
	Trains, Accessories, Dolls and Such, LLC			
•	Firm/Company			
	1613 Orange Avenue			
•	Address			
	Tavares, F1 32778-2111			
•	City/State and Zip Code			
1	Buyshomes@aol.com			
	E-mail address: (to be used for future annual report notification)			
For further in	formation concerning this matter, please call:			
I	Dolores Ann Russ 352 343-1613 at ()			
	Name of Person Area Code Daytime Telephone Number			
Enclosed is	a check for the following amount:			
\$125.00 Fil	ing Fee \$130.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)			

Mailing Address

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

Street Address

New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Trains, Access	ories, Dolls and Such LLC		
(Mus	st contain the words "Limited	Liability Company,	"L.L.C.," or "LLC.")
ARTICLE II - Address:			
he mailing address and st	reet address of the principal of	office of the Limited	Liability Company is:
<u>P</u> 1	rincipal Office Address:		Mailing Address:
1613 Orange A	venue		
433.05	70.3111		
	ed Agent, Registered Office,		
ARTICLE III - Registere The Limited Liability Cornother business entity wi	ed Agent, Registered Office,	n Registered Agent. Non.)	
ARTICLE III - Registere The Limited Liability Cornother business entity wi	ed Agent, Registered Office, npany cannot serve as its own th an active Florida registration	n Registered Agent. Non.)	
ARTICLE III - Registere The Limited Liability Cornother business entity wi	ed Agent, Registered Office, npany cannot serve as its own th an active Florida registrationstreet address of the registere	n Registered Agent. Non.)	nt's Signature: You must designate an individual c
ARTICLE III - Registere The Limited Liability Cornother business entity wi	ed Agent, Registered Office, npany cannot serve as its own th an active Florida registrationstreet address of the registere	n Registered Agent. Non.) d agent are: Name	
ARTICLE III - Registere The Limited Liability Cornother business entity wi	ed Agent, Registered Office, npany cannot serve as its own than active Florida registration street address of the registere Dolores Ann Russ 1613 Orange Avenue	n Registered Agent. Non.) d agent are: Name	You must designate an individual o
ARTICLE III - Registere The Limited Liability Cornother business entity wi	ed Agent, Registered Office, npany cannot serve as its own than active Florida registration street address of the registere Dolores Ann Russ 1613 Orange Avenue	n Registered Agent. Non.) d agent are: Name	You must designate an individual o

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 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

RECEIVED

The name and address of each person authorized to manage and control the Limited Liability Company:

	Title;	Name and Address:
	"AMBR" = Authorized Member	
	"MGR" = Manager	
	MGR	Dolores Ann Russ
		1613 Orange Avenue
		Tavares, FI 32778-2111
	MGR	Dolores McCranie
		353 Carriage Lanc
		Lady Lake, tl 32159
	(Use attachment if necessary)	
ARTI	CLE V: Effective date if other than the date	e of filing: (OPTIONAL)
		pecific and cannot be more than five business days prior to or 90 days after
	ite of filing.)	• • • • • • • • • • • • • • • • • • • •
		meet the applicable statutory filing requirements, this date will not be listed a
	cument's effective date on the Department	
	ZILDAN AND TE	
AKII	CLE VI: Other provisions, if any.	
	REOUIRED SIGNATURE:	,
	Dolnes	ann kun
	Signature of a m	nember or an authorized representative of a member.
	*118 * 4	. II

This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes. 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.

Dolores Ann Russ

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)

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