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. COVER LETTER.

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: Andrew Rose Name of Person Catalog Kid Firm/Company 7712 Glendevon Lane Address Delray Beach , Florida 33446 City/State and Zip Code catatalogs@catalogkid.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Andy Rose at (908 at Code) Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: □\$125.00 Filing Fee Certificate of Status (additional copy is enclosed) (additional copy is enclosed)	SIBRIECT:	Catalog Ki	id Collections LLC	
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Mailing Address

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

New Filing Section Division
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

2020 FEB 10 AM 9: 42 SECRETARY OF STATE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

Catalog Kid Collections LLC

(Must conatin 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:

Mailing Address:

7712 Glendevon Lane	7712 Glendevon Lane		
Delray Beach	Delray Beach		
<u>FL</u> 33446	FL 33446		

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:

Andy Rose	Name	
7712 Glendevon La	ne	
Florida street addre	ss (P.O. Box <u>NOT</u> ac	rceptable)
Delray Beach	FI	33446
City	State	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 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

2020 FEB 10 AH 9: 4: SECRETARY OF STAT 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	
/	
	
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411	
(Use attachment if necessary)	
an effective date is listed, the date must be spectate of filing.)	e of filing: 1/1/2020 . (OPTIONAL) becific and cannot be more than five business days prior to or 90 days after meet the applicable statutory filing requirements, this date will not be listed of State's records.
TICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	me -
This document is execu	ember or an authorized representative of a member, ated in accordance with section 605.0203 (1) (b). Florida Statutes, a information submitted in a document to the Department of State
constitutes a third degree	e felony as provided for in s.817.155, F.S.
Andrew Rose	
	Typed or printed name of signee
	S 28

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)

2020 FEB 10 AM 9: 42 SERRETARY OF STATE

STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

CATALOG KID COLLECTIONS, L.L.C.

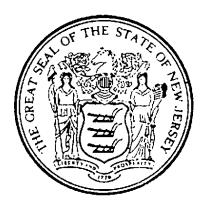
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I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on May 15, 2003.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and office are:

RICK BRODSKY ESQUIRE ANSELL ZARO GRIMM & AARON PC 1500 LAWRENCE AVENUE - CN 7807 OCEAN TOWNSHIP, NJ 07712-0000



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 5th day of February, 2020

Elizabeth Maher Muoio State Treasurer

Sluk A Men

Certificate Number + 6104741246

Verify this certificate unline at

https://www1.state.nj.us/TYTR_StandingCort/JSP/Vorify_Cort.jsp

2020 FEB 10 AM 9: 42
SECRETARY OF STAT