M05000003169

(Re	equestor's Name)					
(Ad	idress)	·				
(Ad	ldress)					
(Cit	(City/State/Zip/Phone #)					
PICK-UP	WAIT	MAIL				
(Business Entity Name)						
(Do	cument Number)					
Certified Copies	Certificates	of Status				
Special Instructions to	Filing Officer:					

Office Use Only



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06/06/05--01019--003 **125.00

MOS-3169

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: ORIGINAL DESIGNS, LLC (Name of Limited L	iability Company)	_
The enclosed "Application by Foreign Limited Liab Business in Florida," Certificate of Existence, and referenced foreign limited liability company to tran	check are submitted to register the	ransact above
Please return all correspondence concerning this	matter to the following:	
LAURIE MCNEIL (Name	e of Person)	
ORIGINAL DESIGNS, LLC (Firm.	/Company)	_
4520 N MARTIN (A	ddress)	_
BETHANY, OK 73008 (City/State	and Zip Code)	
For further information concerning this matter, plea	ase call:	
LAURIE MCNEIL (Name of Person)	at 405 491-1088 (Area Code & Daytime Teleph	one Number)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following amount:		C. T.
X \$125.00 Filing Fee \$130.00 Filing Fee & Certificate of		Filing Fee, Certificate status & Certified Copy

ATX1

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1.	ORIGINAL DESIGNS, LLC					
	(Name of Foreign Lin	nite	d Liability Company)			
2.	OKLAHOMA	3.	03-0518881			
	(Jurisdiction under the law of which foreign limited liabilit company is organized)		(FEI number, if app			
4.	5/27/2003	5	PERPETUAL	-		
	(Date of Organization)		(Duration: Year limited liability exist or "perpetual")	company will cea	se to	
6.	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)					
7.	4520 N. MARTIN			·		
	BETHANY, OK 73008					
	(Street Address	of F	rincipal Office)			
8.	. If limited liability company is a manager-managed company, check here					
9. The name and usual business addresses of the managing members or managers are as follows:						
	LAURIE MCNEIL 4520 N MARTIN BETHANY, OK 73008		——————————————————————————————————————			
	RHONDA RILEY 4520 N MARTIN BETHANY, OK 73008					
cus	Attached is an original certificate of existence, no more to stody of records in the jurisdiction under the law of which intificate is in a foreign language, a translation of the certificate is in a foreign language.	it is cate	organized. (A photocopy is not a under oath of the translator mus	cceptable. If the st be submitted.)	ing	
11.	. Nature of business or purposes to be conducted or prom	iote	d in Florida: SALE OF PURSES	ACCESSORIES		
					<u></u> .	
	Lauri Me	1	100 DO		٠	
	Signature of a member or an author		•	ام این اور می محمد این		
	(In accordance with section 608.408(3), F.S. an affirmation under the penalties of perjury			e de la companya de l		
	LAURIE MCNEIL					

Typed or printed name of signee

03-0518881

ATX1

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

FOLLOWING STATEMENT TO DESIGNAT REGISTERED AGENT IN THE STATE OF		
The name of the Limited Liability Comp	pany is:	
ORIGINAL DESIGNS, LLC		
2. The name and the Florida street addre	ess of the registered agent and office a	are:
C T CORPORATION SYSTEM	(Name)	_
	(Name)	
1200 S PINE ISLAND RD.		_
Florida Street Add	dress (P.O. Box <u>NOT</u> ACCEPTABLE)	
PLANTATION	FL 33324 City/State/Zip	_
Having been named as registered agent and to liability company at the place designated in this registered agent and agree to act in this capacity statutes relating to the proper and complete per accept the obligations of my position as registered.	certificate, I hereby accept the appointmenty. I further agree to comply with the provi formance of my duties, and I am familiar w	nt as sions of all vith and
(Signature)		
(Olginaturo)		
\$ 100.0 \$ 25.0	•	nt

\$ 30.00 Certified Copy (optional)

5.00 Certificate of Status (optional)

Having been named as registered agent and to accept service of process for BagDaddyLLC at the place herein designated:

CT Corporation System c/o CT Corporation System 1200 South Pine Island Road Plantation, Florida 33324

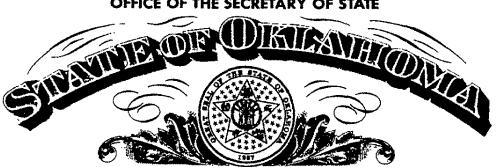
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent for in Chapter 608, F.S.

Dated: May 11, 2005

CT Corporation System

John J. Linnman, Asst. Vice President

OFFICE OF THE SECRETARY OF STATE



CERTIFICATE OF GOOD STANDING DOMESTIC LIMITED LIABILITY COMPANY

I, THE UNDERSIGNED, Secretary of State of the State of Oklahoma, do hereby certify that I am, by the laws of said state, the custodian of the records of the state of Oklahoma relating to the right of certain business entities to transact business in this state and am the proper officer to execute this certificate.

I FURTHER CERTIFY that ORIGINAL DESIGNS, LLC whose registered agent is RICHARD M KLINGE, with its registered office at 3555 NW 58TH ST STE 1000 OKAL CITY 73112 USA Oklahoma is a Domestic Limited Liability Company duly organized and existing under and by virtue of the laws of the state of Oklahoma and is in good standing according to the records of this office. This certificate is not to be construed as an endorsement, recommendation or notice of approval of the entity's financial condition or business activities and practices. Such information is not available from this office.



IN TESTIMONY WHEREOF, I hereunto set my hand and affixed the Great Seal of the State of Oklahoma, done at the City of Oklahoma City, this 2nd, day of May, 2005.

Secretary Of State

M. Gran Swage