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EXAMINER

COVER LETTER

Division of Cor			
SUBJECT: Echo	Wing Promot	ions, LLC	
Sobocci, p	(Name of Limited	Liability Company)	
The enclosed Articles of	Organization and fee(s) are su	bmitted for filing.	·
Please return all correspo	ndence concerning this matter	to the following:	
George	Goeddeke ling Promotic		
J	. ()	Jame of Person)	
Echo h	ling Promotion	ons, LLC	
	<i>J</i> (F	Firm/Company)	7 S 8
1650 1	Pich Street	_	公 五 1
		(Address)	AST IS
Tallah	assee, FL	<i>32303</i>	EN TO THE PERSON OF THE PERSON
	(City/S	State and Zip Code)	7, 4
	oncerning this matter, please c		ORIGINA 33
George Go	reddeke	at (<u>850</u>) <u>212 - 7</u> (Area Code & Daytime Tele	1576
(Name o	f Person)	(Area Code & Daytime Tele	phone Number)
Enclosed is a check for	the following amount:		
]\$125.00 Filing Fee [\$130.00 Filing Fee & Certificate of Status	\$155.00 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 C Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR F	LORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is	
Echo Wing Promotions, (Mussend with the words "Limited Liab	JLC oility Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
Echo Wing Promotions, LLC	Echo Wing Promotions, LLC 1650 Rich Street

Tallahassee, FL 32303

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:

Tallahassee

George Goeddeke

Name

1650 Rich Street

Florida street address (P.O. Box NOT acceptable)

Tallahassee FL 32303

City, State, and 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 608, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

ARTICLE IV- Manager(s) or Mana The name and address of each Manage	
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	George Goeddeke 150 50 1650 Rich Street 177 50
MGRM	Brett Crump 1650 Rich Street Tallahassee, FL 32303
MGRM	David Flock 1650 Rich Street Tallahassee, FL 32303
MGRM	Andrew Parks 1650 Rich Street Tallahassee, FL 32303
(Use attachment if necessary)	·
ARTICLE V: Effective date, if other than the date (If an effective date is listed, the date must be sto or 90 days after the date of filing.)	ate of filing: (OPTIONAL) specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	•
Signature of a member of	1. Social Section of a member.
of this document constituent that the facts stated here	on 608.408(3), Florida Statutes, the execution tes an affirmation under the penalties of perjury ein are true.)
<u>George</u>	4. Goeddeke d or printed name of signee

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation

Filing Fees:

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)