

LO9000055687

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

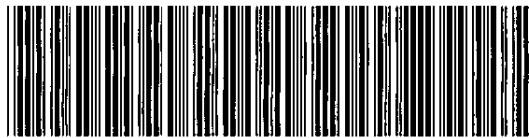
(Business Entry Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

JUN 24 2009

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TravKir LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Articles of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ewout Langemeijer
Name of Person

Corpog Services USA, Inc
Firm/Company

999 Brickell Avenue Ste. 700
Address

Miami, FL 33131
City/State and Zip Code

ewout@corpog.com
E-mail address: (to be used for future annual report notification)

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09 JUN 23 AM 8:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Ewout Langemeijer at (305) 358 7872
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

- \$25 Filing Fee
- \$30 Filing Fee & Certificate of Status
- \$55 Filing Fee & Certified Copy
- \$60 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 15, 2009

EWOUT LANGEMIJER
CORPAG SERVICES USA, INC.
999 BRICKELL AVENUE STE. 700
MIAMI, FL 33131

SUBJECT: TRAVKIR LLC
Ref. Number: L09000055687

We have received your document for TRAVKIR LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce
Regulatory Specialist II

Letter Number: 209A00020138

FILED
09 JUN 23 AM 8:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 608.4115, F.S., this document is being submitted **within the required 30 business days** to correct the **attached** articles of organization or application to transact business in Florida.

FIRST: The name of the limited liability company is:
TravKir LLC

SECOND: The articles of organization or the application to transact business

(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)



Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

The full name of the registered agent (signature) and manager is:

Elena Chichova-Minton

(the last "n" was missing)

OR



Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

Dated: _____

June 18

2009



Signature of a member or authorized representative of a member

David te Boekhorst

Typed or printed name of signee

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)

FILED
09 JUN 23 AM 8:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L09000055687
FILED 8:00 AM
June 09, 2009
Sec. Of State
mthomas

Article I

The name of the Limited Liability Company is:

TRAVKIR LLC

Article II

The street address of the principal office of the Limited Liability Company is:

210 VALENCIA CIRCLE
ST. PETERSBURG, FL. US 33716

The mailing address of the Limited Liability Company is:

210 VALENCIA CIRCLE
ST. PETERSBURG, FL. US 33716

Article III

The purpose for which this Limited Liability Company is organized is:

ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:

ELENA CHICHOVA-MINTO
210 VALENCIA CIRCLE
ST. PETERSBURG, FL. 33716

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.

Registered Agent Signature: ELENA CHICHOVA-MINTO

Article V

L09000055687
FILED 8:00 AM
June 09, 2009
Sec. Of State
mthomas

The name and address of managing members/managers are:

Title: MGR
ELENA CHICHOVA-MINTO
210 VALENCIA CIRCLE
ST. PETERSBURG, FL. 33716 FL

Article VI

The effective date for this Limited Liability Company shall be:

06/09/2009

Signature of member or an authorized representative of a member

Signature: DAVID TE BOEKHORST