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(Requestor's Name)	
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(Business Entity Name) (Document Number)	
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***25.00**

D. BRUCE

JUN 2 4 2009

EXAMINER

COVER LETTER

TO:	Registratio Division of	n Section f Corporations			, ,			
SUBJI	ECT:		TravK	ir LLC				
		Name o	of Limited Lia		mpany			
Dear S	ir or Madam:							
The en	closed Article	es of Correction and fee(s) a	are submitted	for filing.				
Please	return all cor	respondence concerning thi	s matter to the	e followin	g:			
		Ewout Langemeije	r		_			
		Name of Person	•		_			
	C	Corpag Services USA	, Inc		_			
		Tim/Company						
	99	9 Brickell Avenue Ste Address	e. 700		_	SECR FALLA	r 60	
_		Miami, FL 33131			_	RETARY	09 JUN 23	
		City/State and Zip Code				10 P		IT
E	E-mail address	ewout@corpag.cor s: (to be used for future annu	n ual report not	fication)	-	Y OF STATE SEE. FLORIDA	AH 8: 46	-
For fu	ther informat	tion concerning this matter,	please call:					
		out Langemeijer	at (305 _	358 7872	. <u></u>		
	N	ame of Person		Area Co	ode & Daytime Telephone Numb	er		
Registr Division Cliftor 2661 E	ET/COURIE ration Section on of Corpora a Building executive Cer assee, Florida	ntions nter Circle			MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enclos	sed is a checl	k for the following amount	:					
₹ \$25	Filing Fee	\$30 Filing Fee & Certificate of Status	\$55 Fili Certified	ng Fee & d Copy	\$60 Filing Fee, Certificate of Status & Certified Copy			

CR2E062 (08/05)



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

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

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

FIRST	The name of the limited liability company is: TravKir LLC			
SECO:	ND: The articles of organization or the application to transact business			
<u>(CH</u>	ECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE S	TATE	<u>MEN</u>	<u>T</u>
✓	Contains an incorrect statement. The incorrect statement, the reason the statement, and the corrected statement are as follows:	atemer	nt is	
	The full name of the registered agent (signature) and manager is:			
	Elena Chichova-Minton			
	(the last "n" was missing)			
	<u>OR</u>			
	Was defectively signed. The manner in which the document was defective the appropriate correction are as follows:	ly sign	ned ar	nd ——
		TALLA	ال 90	**************************************
		HASS	₩ - 	
Dated:	June ∦ 18	Y OF SI	3 AM 8:	MO
	D-MSall 1	ATE RIDA	47	
	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)			

Electronic Articles of Organization For Florida Limited Liability Company

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

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

• The name and address of managing members/managers are:

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

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

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