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(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Ви	usiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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THAMPTON SYMPTON SYMPTON

TO: Registration Division of C				
_{SUBJECT:} Ecke	r Show Advantage	e LLC		
		ed Liability Comp	any	
The enclosed Articles	of Organization and fee(s) are s	submitted for filin	ıg.	
Please return all corre	spondence concerning this matt	er to the followin	g:	
Fred Ec	ker			
		Name of Person		
Ecker SI	now Advantage LL	.C		
		Firm/Company		
5270 Ch	atsworth Court			
		Address		
Orlando, F	FL. 32812			
	_	/State and Zip Cod	e	
necker1@	Cfl.rr.com E-mail address: (to be used for	- C.A.		
		•	on nouncation)	
For further information	1 concerning this matter, please	call:	1	
Fred Ecker		at (407	898-2318	·
Name	e of Person		e & Daytime Tele	phone Number
Enclosed is a check to	for the following amount:			
\$125.00 Filing Fee [\$130.00 Filing Fee & Certificate of Status	\$155.00 Filin Certified Co (additional cop	ру	\$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	Registrat Division Clifton E 2661 Exc Tallahass	ecutive Center (see, FL 32301	
	<u>. 18 dian di naditita.</u> Nati	<u> </u>	, to standard or	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	R	T	I	L	E	I	_	N	a	m	e	

The name of the Limited Liability Company is:

Ecker Show Advantage LLC

(Must end with 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:
5270 Chatsworth Court	5270 Chatsworth Court
Orlando, FL. 32812	Orlando, FL. 32812

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:

Fred Eck	cer
	Name
5270 C	Chatsworth Court
	Florida street address (P.O. Box NOT acceptable)
orlando	FL 32812
	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 Ágent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

SECRETARY OF STATE SECRETARY OF CORPORATIONS
OIVISION OF CORPORATIONS
AND: 52

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Fred Ecker 5270 Chatsworth Court Orlando, FL. 32812
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the date an effective date is listed, the date must be so 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 o	or an authorized representative of a member.
(In accordance with section 608.40 constitutes an affirmation under the	08(3), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true.

Fred Ecker

Typed or printed name of signee

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)

DIVISION OF CORPORATION

TO: Registration So Division of Con			·	
_{SUBJECT:} Ecker	Show Advantage	e LLC		
		ed Liability Comp	pany	
The enclosed Articles of	Organization and fee(s) are	submitted for filir	ıg.	
Please return all correspo	ondence concerning this matt	er to the followin	g:	
Fred Ecke	er			
		Name of Person		
Ecker Sho	ow Advantage LL			
		Firm/Company		
5270 Cha	tsworth Court			
		Address		
Orlando, FL	32812			
	City	y/State and Zip Cod	le	
necker1@cf	.rr.com E-mail address: (to be used f	or future annual ron	ort notification)	
Fan forthau in farmation			on nouncation)	
r or turther information c	oncerning this matter, please	: call:	$v_{i} = 2^{-\alpha}$	
Fred Ecker		_ _{at (} 407	898-2318	
Name o	f Person	Area Cod	e & 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 Filis Certified Co (additional cop	ру	\$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 Circle Tallahassee, FL 32301				
		. 403	cr potat poc s	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ART	TICLE	I - 1	Nam	e

The name of the Limited Liability Company is:

Ecker Show Advantage LLC

(Must end with 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:
5270 Chatsworth Court	5270 Chatsworth Court
Orlando, FL. 32812	Orlando, FL. 32812

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:

Fred Eck	(er
	Name
5270 C	Chatsworth Court
	Florida street address (P.O. Box NOT acceptable
orlando	_{FL} 32812
	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 Ágent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

SECRETARY OF STATE OIVISION OF CORPORATIONS

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGRM	Fred Ecker 5270 Chatsworth Court Orlando, FL. 32812
Parent see	
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the control of the date of the date must to or 90 days after the date of filing.)	he date of filing: (OPTIONAL) be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	7 - 1

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

> Fred Ecker Typed or printed name of signee

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)