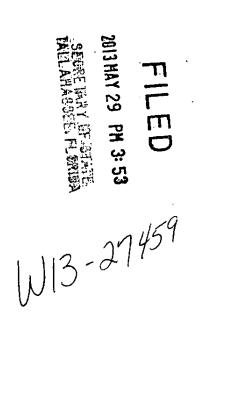
(Re	questor's Name)			
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(Cit	y/State/Zip/Phone	· #)		
PICK-UP	WAIT	MAIL		
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(Document Number)				
Certified Copies	_ Certificates	of Status		
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(850) 245-6051.

COVER LETTER

TO:	Registration : Division of Co				
SUBJ	ECT: ECO	Trip, LLC			
		Name of Limit	ed Liability Com	pany	
The er	closed Articles of	of Organization and fee(s) are	submitted for filir	ıg.	
Please	return all corresp	condence concerning this matt	ter to the followin	g:	ب
	John B	rink			
		· · · · · · · · · · · · · · · · · · ·	Name of Person		N 29
			Firm/Company		
	5218 S	tation Way			53
			Address		
	Saraso	ta, FL 34233			
	BrokerBri	Cit nk@gmail.com E-mail address: (to be used	ry/State and Zip Coofficients		
For fu	ther information	concerning this matter, please	call:		
Jol	nn Brink		941	928-5	555
	Name	of Person	Area Coo	de & Daytime Tele	phone Number
Enclo	sed is a check f	or the following amount:			
□\$125	.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Fill Certified C (additional co		\$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



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 9, 2013

JOHN BRINK 5218 STATION WAY SARASOTA, FL 34233

SUBJECT: ECO TRIP, LLC Ref. Number: W13000027459



We have received your document for ECO TRIP, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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) 245-6051.

Joey Bryan Regulatory Specialist II

Letter Number: 113A00011532

ARTICLE I - Name:	三 三
The name of the Limited Liability Company i	is: 29
Eco Trip, LLC	温 ·
(Must end with the words "Limited Lia	ability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	The state of the s
	principal office of the Limited Liability Company
-	
Principal Office Address:	Mailing Address:
5218 Station Way	5218 Station Way
Sarasota, FL 34233	Sarasota, FL 34233
ARTICLE III - Registered Agent, Register	red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Registers business entity with an active Florida registration.) The name and the Florida street address of the	red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another e registered agent are:
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Registers business entity with an active Florida registration.) The name and the Florida street address of the John Brink	red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another e registered agent are:
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Registers business entity with an active Florida registration.) The name and the Florida street address of the John Brink Name of Service Agent, Register Na	red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another e registered agent are:
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Registers business entity with an active Florida registration.) The name and the Florida street address of the John Brink Name of Service Agent, Register Na	red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another e registered agent are:

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 Managing Member(s):

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

<u>Title:</u>	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	
MGR	John Brink 5218 Station Way
	5218 Station Way
	Sarasota, FL 34233
	
(Use attachment if necessary)	
(Ose attachment if necessary)	
CLE V: Effective date, if other than the	date of filing: (OPTIONAL)
	t be specific and cannot be more than five business da
to or 90 days after the date of filing.)	•
DECHIDED CICKLATUDE.	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	
	er 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.)

John Brink

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)