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ASPIRE LOYALTY TRAVEL SOLUTIONS LLC

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COVER LETTER

	ration Section on of Corporations		
SUBJECT: A	SPIRE LOYALTY TRAVEL SOL Name of Lin	UTIONS LLC mited Liability Company	
	rticles of Organization and fee(s) as	_	
	I correspondence concerning this m	natter to the following:	
.Re	gina M. Scott	Name of Person	
<u>M</u>	orris, Manning & Martin, LLP	Firm/Company	
_33	43 Peachtree Road. NE. Suite 1	600 Address	
Att	anta, Georgia 30326-1044	City/State and Zip Code	
_rscott@n	mmlaw.com E-mail address: (to be use	d for future annual report notifice	ation)
For further info	rmation concerning this matter, plea	ase call:	
Regina M. Sc	ott at (4 Name of Person		lephone Number
Enclosed is a cl	eck for the following amount:		
☐ \$125,00 Filing	Fee S130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address	Street/Courier Add	rate

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Aspire Loyalty Travel Solutions LLC (Must end with the words "Limite	d 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:
1530 Comerstone Boulevard Suite 120 Daytona Beach, FL 32117	1530 Cornerstone Boulevard Suite 120 Daytona Beach, FL 32117
ARTICLE III - Registered Agent, Registered Office (The Limited Liability Company cannot serve as its ow another business entity with an active Florida registration.) The name and the Florida street address of the registere	n Registered Agent. You must designate an individual or ion.)
-	d agent are.
Kyle E. Davis	<u></u>
3537 Kilgalien Court Florida street address (P.O. Bo	ox NOT acceptable)
Ormond Beach	FL 32174
City	Zip
the place designated in this certificate, I hereby acce capacity. I further agree to comply with the provision of my duties, and I am familiar with and accept the o	ervice of process for the above stated limited liability company at pt the appointment as registered agent and agree to act in this s of all statutes relating to the proper and complete performance bligations of my position as registered agent as provided for in pter 605, F.S
MESIE	SEGNAL A
Registered Agent's Sign	ature (REQUIRED)
(CONTIN	UED)
Page 1 of	2 8 5 6 6 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6

<u>Fitte:</u>	Name and Address:
'AMBR" = Authorized Member 'MGR" = Manager	
MGR	Kyle E. Davis
	3537 Kligallen Court
	Ormond Beach.
Tipe attachment if negacions	
Use attachment if necessary) EV: Effective date, if other than the ctive date is listed, the date must if filling.)	e date of filing:
EV: Effective date, if other than the ctive date is listed, the date must if filling.) EVI: Other provisions, if any. ment of the Limited Liability Con REQUIRED SIGNATURE: Signature of	a member or an authorized representative of a member.
EV: Effective date, if other than the ctive date is listed, the date must if filling.) EVI: Other provisions, if any. ment of the Limited Liability Consense of the Limited Liability Consense of the Constitutes an affirmation I am aware that any false constitutes a third degree	a member or an authorized representative of a member. on 605.0203 (1) (b), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true. information submitted in a document to the Department of State.
CV: Effective date, if other than the ctive date is listed, the date must if filling.) EVI: Other provisions, if any. nent of the Limited Liability Constitutes an affirmation I am aware that any false constitutes a third degree	a member or an authorized representative of a member. on 605.0203 (1) (b), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.)
CV: Effective date, if other than the ctive date is listed, the date must if filling.) CVI: Other provisions, if any. nent of the Limited Liability Constant of the Limited Liability Constant of (In accordance with section constitutes an affirmation I am aware that any false constitutes a third degree	a member or an authorized representative of a member. on 605.0203 (1) (b), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.)