LI6000115999

(Re	equestor's Name)	
(Ad	ddress)	
(Ad	ddress)	
(C	ity/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bi	usiness Entity Nam	ne)
(D	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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JUNJ 2016; S. GILBERT

COVER LETTER

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10:	Division of Corporations			
SUBJEC	Traveor.L.L.C			<i>,</i>
SUBJEC		Limited Liabili	y Company	··········
The encl	losed Articles of Organization and fee(s)	are submitted	or filing.	
Please re	eturn all correspondence concerning this	matter to the fo	llowing:	,
	Joseph Muller			
		Name of 1	Person	
	Traveor.L.L.C			
		Firm/Cor	npany	
	8744 Turnstone Haven Place			
		Addre	ss	
	Tampa Fl. 33619			
	joemullerlie a hotmail.com	City/State and	Zip Code	
	E-mail address: (to be us	sed for future ar	nual report notifica	tion)
For furthe	r information concerning this matter, ple	ease call:		
	Joseph Mullerat (941	662 5521	
	Name of Person	Area Code	Daytime Telepho	ne Number
Enclosed	I is a check for the following amount:			
\$125 .00	Filing Fee \$130,00 Filing Fee & Certificate of Status	Certifie) Filing Fee & d Copy l copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32344]] (Street Address New Filing Section Division of Corpora Clifton Building 1661 Executive Cen Fallahassee, FL 323	ter Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLES OF	ORGAN IZATION FOR I	FLORIDA LIMI	TED LIABILITY COMPANY	2011
	•			LED
ARTICLE 1 - Name: The name of the Limited Liability	v Company is:			16 JUN -6 DU
,				3: 00
Travcor.LLC				All Michigan St. Sime
	with the words "Limited	Liability Com	pany, "L.L.C.," or "LLC.")	16 JUN-6 PM 3: 00
ARTICLE II - Address: The mailing address and street ad	ldress of the principal of	fice of the Lim	ited Liability Company is:	
Princip:	il Office Address:		Mailing Add	ress:
8744 Turnstone Have	en Place		8744 Turnstone Haven place	
Tampa Fl. 33619		:	Гатра Fl. 33619	
				
another business entity with an a The name and the Florida street a	address of the registered			
	Joseph Muller	Name		
	8744 Turnstone Have Florida street address		T aggentable)	
		к(1 .O. D0, <u>ИС</u>	1 acceptable)	
	Tampa Fl. 33619			
	City	State	Zip	
Having been named as registered a place designated in this certificate, further agree to comply with the proam familiar with and accept the object.	I hereby ac <mark>cept the appo</mark> wisions of all statutes re	ointment as regi lating to the pr	stered agent and agree to act oper and complete performand	in this capacity. I ce of my duties, and I
	- De Argi	L Mont	Phature (REOLIRED)	

(CONTINUED) Page 1 of 2

	Name and Address:
"AMBR" = Authorized N	lember
"MGR" = Manager	1 1 1 1 1 1
AMBR	Joseph Muller
	8744 Turnstone Haven Place
	Tampa Fl. 33619
	
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	•
EV: Effective date, if other cities date is listed, the defiling.)	er than the date of filing: June 10 2016 . (OPTIONAL) ate must be specific and cannot be more than five business days prior to or 9
ctive date is listed, the d f filing.) the date inserted in this b	
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E V: Effective date, a of cive date is listed, the of filing.) the date inserted in this benent's effective date on the E VI: Other provisions, if This doe I am awa constitute	cer than the date of filing: June 10 2016 (OPTIONAL) Intermust be specific and cannot be more than five business days prior to or 9 lock does not meet the applicable statutory filing requirements, this date will not be Department of State's records. Intermediate the applicable statutory filing requirements, this date will not be Department of State's records. Intermediate the applicable statutory filing requirements, this date will not be Department of State and the Department of State statutes that any false information submitted in a document to the Department of State statuted degree felony as provided for in s.817.155, F.S.

ARTICLE IV-