U7000137847

(Re	questor's Name)		
(Ad	dress)		
(Ad	dress)		
(Cit	y/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nar	me)	
(Do	cument Number)		
Certified Copies Certificates of Status			
Special Instructions to	Filing Officer:		

Office Use Only



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08/28/17-010:1--012 **:50.00

J. FASON JUN 2 7 2017

COVER LETTER

2110 111477	Life On Purpose Travel,	LLC
SUBJECT:		Name of Limited Liability Company
The enclose	d Articles of Organization	and fee(s) are submitted for filing.
Please return	n all correspondence conce	rning this matter to the following:
	Taylor Lunin	
-		Name of Person
	Life On Purpose Travel, L	F.C.
		Firm/Company
	2250 Edelweiss Loop	
-		Address
	New Port Richey, FL 3465	55
r r	aylor@LifeOnPurposeTra	City/State and Zip Code vel.com
_	E-mail address	(to be used for future annual report notification)
or further in	formation concerning this r	natter, please call:
,	Faylor Lunin	727 364-3030
_	Name of Person	at () Area Code Daytime Telephone Number
Inclused in	a check for the following a	
\$125,00 Fili	_	

Mailing Address

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liabili	ty Company is:				
17 O D					
Life On Purpose T	ravel, LLC tain the words "Limited L	inhility Compan			
(Must con	tain the words. Limited L	лаонну Сотраг	ly, L.L.C., or LLC.		
ARTICLE II - Address: The mailing address and street a	iddress of the principal of	fice of the Limit	ed Liability Company is:		
Princip	Principal Office Address:		Mailing Address:		
2250 Edelweiss Lo	000	54	166 Baldwin Park St		
New Port Richey, I			Unit 306		
		<u> </u>	rlando, FL 32814		
	LEGALING CORPO	RATE SERVIC Name	CES INC.		
	5237 SUMMERLIN				
	Florida street address (P.O. Box NOT acceptable)				
	FORT MYERS	FL	33907		
	City	State	Zip		
Having been named as registered place designated in this certificate further agree to comply with the parn familiar with and accept the oil	. I hereby accept the appo rovisions of all statutes re	intment as regist lating to the proj	ered agent and agree to act per and complete performan	in this capacity. I ace of my duties, and I	
	Much	fine			
	Registe	red Agent's Sigi	nature (REQUIRED)		
	Nicolas	Sun/Vic	nature (REQUIRED)		
		(CONTINUE))	 4 .	

"MGR" = Manager MGR	Taylor Lunin
WICK	
	2250 Edelweiss Loop
	New Port Richey, FL 34655
	New Politicality, 17, 1967.
	
	
(Use attachment if necessary)	
ICLE V. Conceive data if other than the data	e of filing:
water data in listed, the data must be an	ecific and cannot be more than five business days prior to or 90 days after
n effective date is fisted, the date must be sp late of filing.)	ecine and cannot be more than five business days prior to or 90 days att
	meet the applicable statutory filing requirements, this date will not be listed
document's effective date on the Department	
document's effective date on the Department	of Mac Specolds.
TCLE VI: Other provisions, if any,	
The state of the s	
REQUIRED SIGNATURE:	,
REQUIRED SIGNATURE:	Tayle L.

Filing Fees:

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

constitutes a third degree felony as provided for in s.817.155, F.S.

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Taylor Lunin