**Division of Corporations Electronic Filing Cover Sheet** 

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Division of Corporations

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## FLORIDA LIMITED LIABILITY CO. **ECCOMOTION LLC**

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

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Corporate Filing Menu

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limite	ed Liability Company is	:	
	ECCC	MOTION LLC	
(3)	Must end with the word	"Limited Liability Company, "L.L.	.C.," or "LLC.")
ARTICLE II - Addres			
The mailing address an	d street address of the p	rincipal office of the Limited Liabil	ity Company is:
Principal Office Addr	' <del>ess:</del>	Mailing Address:	
6303 BLUE LAGOON D	DRIVE, SUITE 400	6303 BLUE LAGOON	DRIVE, SUITE 400
MIAMI, FL 33126		MIAMI, FL 33126	<u></u>
	Company cannot serve with an active Florida		
THE BAILE USE THE TROTT			
	ASHLEY GOULD	Name	<del></del>
	6303 81116 1 40	OON DRIVE, SUITE 400	
	<del></del>	(P.O. Box NOT acceptable)	<del></del>
	MIAMI	FL 33126	
	City	Zip	<del>_</del>
the place designated capacity. I further ag	d in this certificate, I he gree to comply with the p	reby accept the appointment as regist	he proper and complete performance
	,	ISHLEY GOULD	THAY I
		nt's Signature (REQUIRED)	ASSW WALLA
	ASI	HLEY GOULD	For Slyric 1038
			14.5:04 11.08:11

## H21000197586

itle:	Name and Address:
AMBR" = Authorized Member MGR" = Manager	
AMBR	ASHLEY GOULD
	6303 BLUE LAGOON DRIVE, SUITE 400
	MIAMI, FL 33126
<del></del>	
V: Effective date, if other than the o	ate of filing: (OPTIONAL)  specific and cannot be more than five business days prior to or 90 days
ctive date is listed, the date must be filing.)  VI: Other provisions, if any.	specific and cannot be more than five business days prior to or 90 days
V: Effective date, if other than the cative date is listed, the date must be filing.)  VI: Other provisions, if any.	specific and cannot be more than five business days prior to or 90 days
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V: Effective date, if other than the outive date is listed, the date must be filing.)  VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a (In accordance with section constitutes an affirmation I am aware that any fals)	ASHLEI COULD  member or an authorized representative of a member. on 605.0203 (1) (b), Florida Statutes, the execution of this document in under the penalties of perjury that the facts stated herein are the conformation submitted in a document to the Department of States.
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