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(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
(,,,				
PICK-UP WAIT MAIL				
(Business Entity Name)	_			
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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SECRETARY OF STATE

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C. LEWIS

Jan. 9-14

EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 23, 2013

ULRICO LIVINGSTON / ECHO, LLC 10 SW 23 STREET FT. LAUDERDALE, FL 33315 US

SUBJECT: ECHO GENERATIONS, LLC

Ref. Number: W13000069715

We have received your document for ECHO GENERATIONS, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carolyn Lewis
Regulatory Specialist II

Letter Number: 013A00029017

•	
CR2E027	(9/10)

COVER LETTER

	tration Section ion of Corporations					
SUBJECT:	Echo Generation	s, LL	.C			
	Na	me of Lin	nited Liability Company	· 		
The enclosed " Existence, and	Application by Foreign Limited Liab check are submitted to register the al	ility Com bove refer	pany for Authorization to Tra enced foreign limited liability	unsact Business in Florida," Certificate of company to transact business in Florida		
Please return a	Il correspondence concerning this ma	itter to the	following:			
	Ulrico Livingsto	n				
		Na	ame of Person	the state of the s		
	Echo, LLC					
		Fi	rm/Company			
	10 SW 23 Stree	et				
			Address			
	Ft. Lauderdale,	FL 3	33315			
City/State and Zip Code						
	ulricsi@gmail.co	om				
	E-mail address: (to be used	for future annual report noti	fication)		
For further info	ormation concerning this matter, pleas	se call:				
Ric	c Livingston		_{at} 561 420)-9720		
''' 	Name of Person	Area	a Code & Daytime Telephone	Number		
Divisi Regist P.O. E	LING ADDRESS: ion of Corporations tration Section Box 6327 nassee, FL 32314	Divisio Registr Clifton 2661 E	or ADDRESS: n of Corporations ation Section Building xecutive Center Circle assee, FL 32301			
	a check for the following amou 25.00 Filing Fee	g Fee &	☐ \$155.00 Filing Fee & Certified Copy	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy		

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	ECHO GENERATIONS, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
ÇO:	f name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written ensent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability ompany," "L.L.C," "LLC.")
	Delaware (Jurisdiction under the law of which foreign limited liability company is organized) 3. 46-4306994 (FEI number, if applicable)
4.	10/0/0012 / Dametual
7 . 6.	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
U.	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7.	16192 Coastal Hwy,
	Lewes, Delaware 19958Ulrico
	(Street Address of Principal Office) ≥
8.	If limited liability company is a manager-managed company, check here
9.	The name and usual business addresses of the managing members or managers are as follows: Ulrico Livingston, 10 SW 23 Street, Ft. Lauderdale, FL 33315 MGRM
the tran	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in ciprisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a islation of the certificate under oath of the translator must be submitted.) Nature of business or purposes to be conducted or promoted in Florida: Cosmetics and Healthcare Products Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., 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.) Ulrico Livingston

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is: ECHO GENERATIONS, LLC	
If unavailable, the alternate to be used in the state of Florida is:	
2. The name and the Florida street address of the registered agent and office are:	13 D
Ulrico Livingston	DEC 31 CRETARY ABLESSE
(Name)	
10 SW 23 Street	#: 32
Florida Street Address (P.O. Box NOT ACCEPTABLE)	<u> </u>
Ft. Lauderdale _{FL} 33315	
City/State/Zip	NAME

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, Florida Statutes.

(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Delaware

PAGE

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "ECHO GENERATIONS, LLC" IS DULY

FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE SEVENTH DAY OF JANUARY, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE
NOT BEEN ASSESSED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED
LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF
DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT
HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS
OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ECHO GENERATIONS, LLC" WAS FORMED ON THE NINTH DAY OF DECEMBER, A.D. 2013.

5445248 8300

140016109

Jeffrey W. Bullock, Secretary of SI AUTHENTICATION: 1036803

DATE: 01-07-14

You may verify this certificate online at corp.delaware.gov/authver.shtml