

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: ECO GLOBAL, LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Shaun O'Regan

Name of Person

Eco Global, LLC

Firm/Company

4582 N. Hiatus Road

Address

Sunrise, FL 33351

City/State and Zip Code

info@eco-tabs.co.za

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kevin Linn

954

583-0555

Name of Contact Person

at (_____) _____

Area Code

Daytime Telephone Number

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$125.00 Filing Fee

☒ \$130.00 Filing Fee &
Certificate of Status

☐ \$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 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. ECO GLOBAL, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. South Dakota
(Jurisdiction under the law of which foreign limited liability company is organized)

3. _____
(FEI number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 4582 N. Hiatus Road
(Street Address of Principal Office)

6. 4582 N. Hiatus Road
(Mailing Address)

Sunrise, FL 33351

Sunrise, FL 33351

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: John O'Malley, Esq.

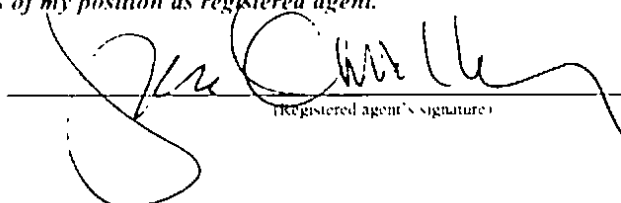
Office Address: 4582 N. Hiatus Road

Sunrise, FL. _____, Florida 33351
(City) (Zip code)

2020 MAR - 2 PM
FILED
CLERK OF DISTRICT COURT
FALL ANDERSON, FLORIDA

Registered agent's acceptance:

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input type="checkbox"/> Manager	Name: Shaun O'Regan	<input type="checkbox"/> Manager	Name: _____
<input checked="" type="checkbox"/> Member	Address: 4582 N. Hiatus Road	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	Sunrise, FL 33351	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
 <input type="checkbox"/> Manager	Name: _____	 <input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	_____	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
 <input type="checkbox"/> Manager	Name: _____	 <input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	_____	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

⁹ Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

Signature of an authorized person

Shaun O'Regan

Typed or printed name of signer: _____

State of South Dakota

Office of the Secretary of State

Certificate of Certified Copies

I, **Steve Barnett**, Secretary of State of the State of South Dakota, hereby certify that the specified attached documents for Eco Global, LLC, Business ID DL156363 are true and correct copies and were filed in this office on the date(s) indicated below.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused to be affixed the Great Seal of the State of South Dakota, in Pierre, the Capital City, this day, January 28, 2020.

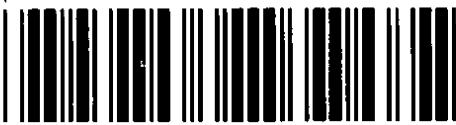
Steve Barnett

Steve Barnett
Secretary of State

Request#: 0149059

The attached document(s) was/were filed in this office on the date(s) indicated below:

Filing Description	Date Filed	DLN#	Pages
Initial Filing	11/14/2018	B0079-5151	3
2019 Annual Report (Due 11/01/2019)	10/04/2019	B0116-8131	2



5308715

ANNUAL REPORT

Secretary of State
500 E. Capitol Ave
Pierre, SD 57501-5070
(605) 773-4845

Domestic Limited Liability Company
SDCL 47-34A-211; 59-11-24, 24.1

2019
FILING YEAR

Please Type or Print Clearly in Ink
Please submit one Original
Make payable to the SECRETARY OF STATE

Filing Fee: \$50

Total Fee: \$50

1. Business ID and Name:

DL156363
BUSINESS ID

Eco Global, LLC
BUSINESS NAME

2. The jurisdiction under whose law it is formed South Dakota

3. The address of the principal executive office (business address):

Actual Street Address

401 E 8TH ST STE 214-1619
SIOUX FALLS, SD 57103

Mailing Address

401 E 8TH ST STE 214-1619
SIOUX FALLS, SD 57103

4. The South Dakota Registered Agent's Name:

South Dakota law permits the registered agent to be either (a) a noncommercial registered agent, or (b) a commercial registered agent.

(b) The South Dakota Commercial Registered Agent's name & CRA#

CRA: **DAKOTA AGENT SERVICES, LLC (0000037)**

Actual Street Address in this State

401 E 8TH ST
STE 214-1619
SIOUX FALLS, SD 57103-7049

Mailing Address in this State

5. If the LLC is manager-managed, list the names and addresses of its Managers. SDCL 59-11-24. If the LLC is member-managed, this section may be left blank.

6. Beneficial Owners (optional): A beneficial owner is a person who has or in some manner controls an equity security. Please consult an attorney for legal advice if you have any questions concerning this entry. Any question under this heading is considered a request for legal advice and the secretary of state's office is, by statute, not permitted, to provide legal advice.

No person may execute this report knowing it is false in any material respect. Any violation may be subject to a criminal penalty (SDCL 22-39-36).



DL15636

ARTICLES OF ORGANIZATION

DOMESTIC LIMITED LIABILITY COMPANY
SDCL 47-34A-203, 212

Secretary of State
500 E. Capitol Ave
Pierre, SD 57501-5070
(605) 773-4845

Filing Fee: \$150

Total Fee: \$150

Please Type or Print Clearly in Ink
Please submit one Original
Make payable to the SECRETARY OF STATE

Article I

The name of the Company: **Eco Global, LLC**

Article II

The address of the initial designated office in or out of the State of South Dakota where the company conducts its business:

Actual Street Address

**401 E 8TH ST STE 214-1619
SIOUX FALLS, SD 57103**

Mailing Address

**401 E 8TH ST STE 214-1619
SIOUX FALLS, SD 57103**

Article III

SDCL 59-11-6

The South Dakota Registered Agent's Name:

South Dakota law permits the registered agent to be either (a) a noncommercial registered agent or (b) a commercial registered agent.

(b) The South Dakota Commercial Registered Agent's name & CRA#

CRA: **DAKOTA AGENT SERVICES, LLC (0000037)**

Actual Street Address in this State

**401 E 8TH ST
STE 214-1619
SIOUX FALLS, SD 57103-7049**

Mailing Address in this State

Article IV

The name and address of each organizer

Name

Address

David DeLoach

32565B Golden Lantern St Ste 140, Dana Point, CA 92629

Article V

The duration of the company if other than perpetual is: **Perpetual**

If the document is not to be effective upon filing by the Secretary of State, the delayed effective date is: _____



10/04/2019

Dated

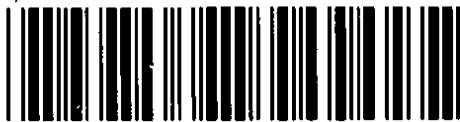
Email (Optional)

DAVID DELOACH

Signature of an Authorized Person

DAVID DELOACH

Printed Name



Article VI

☒ Member-Managed ☐ Manager-Managed

Article VII

Whether one or more of the members of the company are to be liable for its debts and obligations as set forth under SDCL 47-34A-303(c).

☐ Yes ☒ No

Article VIII

Beneficial Owners (optional): A beneficial owner is a person who has or in some manner controls an equity security. Please consult an attorney for legal advice if you have any questions concerning this entry. Any question under this heading is considered a request for legal advice and the secretary of state office is, by statute, not permitted, to provide legal advice.

Article IX

ADDITIONAL PROVISIONS OF THE ARTICLES OF ORGANIZATION

The liability of the managers, members and agents of this LLC for monetary damages shall be eliminated to the fullest extent permissible under SOUTH DAKOTA law.

This LLC is authorized to provide indemnification of managers, members and agents to the fullest extent permissible under SOUTH DAKOTA law.

Any amendment, repeal or modification of any provision of this Article shall not adversely affect any right or protection of a manager, member or agent of this LLC existing at the time of such amendment, repeal or modification.

Signature/Authorization

The Articles of Organization must be executed by the organizers.

No person may execute this report knowing it is false in any material respect. Any violation may be subject to a criminal penalty (SDCL 22-39-36).

David DeLoach

David DeLoach

11/14/201

PRINTED NAME

SIGNATURE

TITLE

DATED

State of South Dakota

Office of the Secretary of State

Certificate of Organization

Domestic Limited Liability Company

I, **Shantel Krebs**, Secretary of State of the State of South Dakota, hereby certify that the ARTICLES OF ORGANIZATION for

Eco Global, LLC

BUSINESS ID# DL156363

with an effective date of: November 14, 2018, duly signed and verified, SDCL 47-34A-203, 212 has been received in this office and is found to conform to law.

ACCORDINGLY, and by virtue of the authority vested in me by law, I hereby issue this Certificate of Organization and attach hereto a duplicate of the ARTICLES OF ORGANIZATION.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused to be affixed the Great Seal of the State of South Dakota, in Pierre, the Capital City, this day, November 14, 2018.

Shantel Krebs

11/14/2018 12:24 PM

Shantel Krebs
Secretary of State



Florida Department of Revenue



Oden Industries, Inc.

ODS

Delivery Manifest

DELIVER TO: **CAPITOL BLDG**

ITEM COUNT: 1

OPERATOR: BEN PARKER

AIRBILL

COURIER

INFO

1Z8797190354722380

UPS GROUND

Signature: _____ Date: _____ Time: _____

SIGNATURE IS REQUIRED FOR ALL DELIVERIES

Internal Revenue Service
Submission Processing Center
Ogden, UT 84201
Official Business
Penalty for Private Use, \$300

Florida Department of Revenue
5050 W Tennessee St
Tallahassee, FL 32399

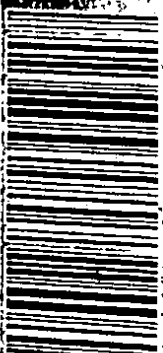
UNITED STATES UNIT
1801 50550
INTERNAL REVENUE SERVICE
1160 4 171M ST
OGDEN UT 84201-0005

5 LBS

SHIP TO:
FLORIDA DEPARTMENT OF REVENUE
5050 WEST TENNESSEE STREET
TALLAHASSEE, FL 32399

UPS GROUND

TRACKING #: 1Z 879 719 03 5472 2380



FL 323 0-01



BLUENCH/P/P

REF: 105521/510532
REF: 210150-510532