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2005 JAN 28 A 3: 46 <u>SECRETARY</u> OF STATE TALLAHASSEE, FLORIDA (Requestor's Name) (Address) 000044185620 (Address) (City/State/Zip/Phone #) PICK-UP TIAW [MAIL 01/28/05--01039--009 **130.00 (Business Entity Name) (Document Number) Certified Copies _____ Certificates of Status _ Special Instructions to Filing Officer:

Office Use Only

TRANSMITTAL LETTER

FILED

TO:

Registration Section Division of Corporations

2005 JAN 28 A 3: 46

SECRETARY OF STATE SUBJECT: J B Aviation LLC (Name of Limited Liability Company) The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Jack W. Brawley (Name of Person) J B Aviation LLC (Firm/Company) 320 SE 11 th St. (Address) Pompano Beach, FL. 33060 (City/State and Zip Code) For further information concerning this matter, please call: Jack W. Brawley (Area Code & Daytime Telephone Number) (Name of Person) Enclosed is a check for the following amount: ☐ \$160.00 Filing Fee, ☐ \$125.00 Filing Fee **ℤ** \$130.00 Filing Fee & □ \$155.00 Filing Fee & Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed)

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

MAILING ADDRESS:

Registration Section Division of Corporations F.O. Box 6327 Tallahassee, Florida 32314

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILATY ACOMPANY

A DOVE TO A NAME OF THE PARTY O	SECRETARY OF STATE TALLAHASSEE. FLORIDA
ARTICLE I - Name: The name of the Limited Liability Company is:	FLORIDA
J B Aviation LLC	
ARTICLE II - Address: The mailing address and street address of the page 1.	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
320 SE 11 th St.	320 SE 11 th St.
Pompano Beach, FL. 33060	Pompano Beach, FL. 33060
ARTICLE III - Registered Agent, Registered	
Jack W. Brawley	
Name	
320 SE 11 th St.	
Florida street ad	dress (P.O. Box <u>NOT</u> acceptable)
Pompano Beach,	FL 33060
City, State,	and Zip
Uning hear named as registered agent and to	accent service of process for the above stated limited

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, F.S..

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: FILED Title: Name and Address: "MGR" = Manager 2005 JAN 28 A 3: 46 "MGRM" = Managing Member SECRETARY OF STATE Jack W. Brawley MGR 320 SE 11 th St. Pompano Beach, FL. 33060 (Use attachment if necessary) NOTE: An additional article must be added if an effective date is requested. **REQUIRED SIGNATURE:** Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.) Jack W. Brawley Typed or printed name of signee

Filing Fees:

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

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)