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COVER LETTER

	TO: Registration Section Division of Corporations				
7					
	SUBJECT: IDS 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:				
	DANIELLE HESSER				
	Name of Person				
	IDS AVIATION LLC				
	Firm/Company				
5535 NW 23rd AVE HANGER 16					
	Address				
FORT LAUDERDALE FL 33309					
City/State and Zip Code					
idsaviation@comcast.net E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
	Danielle Hesser at (954) 986 0517				
	Name of Person Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount:					
X	\$125.00 Filing Fee \$\ \text{Certificate of Status} \text{S155.00 Filing Fee & Certified Copy (additional copy is enclosed)} \text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)}				
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301				

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

IDS AVIATION LLC	
(Must end with the words "Limited Liability	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
IDS AVIATION LLC 5535 NW 23rd AVE. HANGER 16 FORT LAUDERDALE, FL 33309	IDS AVIATION LLC 5535 NW 23rd AVE. HANGER 16 FORT LAUDERDALE, FL 33309
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	
The name and the Florida street address of the re	
Shaun Sutton	FILE STARTO WHASSEE
Name	
3389 SHERIDAN STREET	#122 ess (P.O. Box NOT acceptable)
Florida street addr	ess (P.O. Box NOT acceptable)
HOLLYWOOD	FL 33021
City, Stat	e, and Zip
liability company at the place designated in th	ccept service of process for the above stated limited his certificate, I hereby accept the appointment as . I further agree to comply with the provisions of all formance of my duties, and I am familiar with and

Registered Agent's Signature (REQUIRED)

accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managin	g Member
MGRM	DANIELLE HESSER 6561 MCKINLEY ST HOLLYWOOD, FL 33024
MBR	ILEANA FORD 624 SE 30th TERRACE HOMESTEAD, FL 33033
	if other than the date of filing: 11/15/2011 (OPTIONAL) the date must be specific and cannot be more than five business days prior
to or 90 days after the date of	f filing.)
REQUIRED SIGNA	Danule Hesse HASSEE
(In accordance constitutes a I am aware t	ce with section 608.408(3), Florida Statutes, the execution of this document affirmation under the penalties of perjury that the facts stated herein are true. Let third degree felony as provided for in s.817.155, F.S.)
Da	anielle Hesser
	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)