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9-23-97

DEPT. OF STATE

DIV. OF CORP.

PO Box 6327

TALLAHASSEE, FL 32314

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-09/29/97--01177--001

****337.50 ****337.50

SUBJECT: ARTICLES OF ORGANIZATION OF A
LIMITED LIABILITY COMPANY

ENCLOSED: ARTICLES I-IV

AFFIDAVIT OF MEMBERSHIP
AND CONTRIBUTIONS

DESCRIPTION OF PROPERTY

CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE

FILING FEES : \$250.00 ARTICLES OF ORGANIZATION
35.00 REGISTERED AGENT
52.50 CERTIFIED COPY
\$ 337.50 CK# 4032

FILED
97 SEP 29 AM 12:00
TALLAHASSEE, FLORIDA
STATE

Name	9/30/97
Availability	dec
Document Examiner	ccc
Updater	ccc
Updater Verifier	c
Acknowledgement	ccc
W. P. Verifier	ccc

Sharon T. Bush

L97000001086

**TRANSMITTAL LETTER
FOR FLORIDA LIMITED LIABILITY COMPANY**

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: ULTRA-FLIGHT OF FLORIDA, L.C.
(Proposed limited liability company name - must include suffix)

Enclosed is an original and one (1) copy.

Filing fee for articles of organization of Florida Limited Liability Company:

\$250.00 Filing fee for Articles of Organization and Affidavit
\$ 35.00 Designation of Registered Agent

A letter of acknowledgment will be issued free of charge upon filing. Please submit an additional \$8.75 if a certificate of status is needed. The fee for a certified copy is \$52.50. **Please send one check for the total amount made payable to the Florida Department of State.**

FROM: WILLIAM E. BUSH
Name (Printed or typed)

624 CRESCENT ST
Address

MARCO ISLAND, FL 34145
City, State & Zip

941-642-5548
Daytime Telephone number

FILED
97 SEP 29 AM 12:00
TALLAHASSEE, FL

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY
COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

ULTRA-FLIGHT OF FLORIDA, L.C.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

*624 CRESCENT ST
MARCO ISLAND, FL 34145*

ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be:

PERPETUAL

ARTICLE IV - Management:

(check and complete the appropriate statement)

- ☐ The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

- ☒ The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

*1. WILLIAM E. BUSH
624 CRESCENT ST
MARCO ISLAND, FL
34145*

*2. SHARON T. BUSH
624 CRESCENT ST
MARCO ISLAND, FL
34145*

FILED
97 SEP 29 AM 12:00
TAMPA, FLORIDA

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of _____

ULTRA-FLIGHT OF FLORIDA, L.C. deposes and says:

1) the above named limited liability company has at least two members

2) the total amount of cash contributed by the member(s) is \$ 7295.00

3) if any, the agreed value of property other than cash contributed by member(s) is \$ 26000.00
A description of the property is attached and made a part hereto.

4) the amount of cash or property anticipated to be contributed by member(s) is \$ 54000.00

5) the total amounts of 2, 3 and 4 is \$ 87295.00

Sharon A. Bush

Signature of a member or authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

DESCRIPTION OF PROPERTY:

DRIFTER SB AIRCRAFT
W/ LYCOMBING ENGINE

RADIOS

INSTRUMENTS

HEAD SETS

FULL LOTUS FLOATS
W/ AMPHIBIOUS GEAR

FILED

97 SEP 29 AM 12:00

SEC 1
TALLAHASSEE, FLORIDA

**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 IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: _____

ULTRA-FLIGHT OF FLORIDA, L.C.

2. The name and address of the registered agent and office is:

SHARON T. BUSH
(NAME)

624 CRESCENT ST
(P. O. Box NOT ACCEPTABLE)

MARCO ISLAND, FL 34145
(CITY/STATE/ZIP)

FILED
97 SEP 29 AM 12:00

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.

Sharon T. Bush
(SIGNATURE)

9-23-97
(DATE)

Filing Fee: \$ 35 for Designation of Registered Agent