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TALLAHASSEE, FLORIDA

## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Accurate Air LL,C.  (Name of Limited Liability Company)	editorymit
The enclosed Articles of Organization and fee(s) are submitted for filing.  Please return all correspondence concerning this matter to the following:	
Peter M. Florence (Name of Person)	<b></b>
Accurate (Firm/Company)	O4 JAH SECALI
404 Tomahawk Trail	حد جو حد
(Address)  Brandon Fl. 33511  (City/State and Zip Code)	-6 AH 9: 43 VKY SF SIAIL SSEE FLORID
For further information concerning this matter, please call:	<b>≫</b>
(Name of Person) (Area Code & Daytime Telephone Number)	

STREET ADDRESS: Registration Section Division of Corporations 409 E. Claines Street Tallahassee, Florida 32399 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

· · · · · · · · · · · · · · · · · · ·
. L. C.
l office of the Limited Liability Company is:
Mailing Address:
404 Tomahawk Trail
Brandon Fl. 33511
TA
c, & Registered Agent's Signature:
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LORIDA 335 \\

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..

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

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

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

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Peter M. Florence HOH Tomahawk Trail Brandon Fl. 33511
	O4 JAN -6
(Use attachment if necessary)	ů,

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), Piorida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Filing Feet: \$100.00 Filing Fee for Articles of Organization

3 25.00 Dazignation of Registered Agent

\$ 30.00 Certified Copy (Optional)

3 5.06 Certificate of Status (Optional)