(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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TRANSMITTAL LETTER

	ration Se on of Co	ction porations				
SUBJECT:	Air C	apital Partners, LLC		-		
-		(Name of Limite	d Liability Cor	mpany)		
The enclosed A	rticles of	Organization and fee(s) are s	ubmitted for fi	lina.		
		ondence concerning this matte		_		
	MARC	O POSSATI				
		0	Name of Person))		
Air Capital F	⊃artners	, LLC				
	+ , ,-+	(Firm/Company)			-
295	GREEN	WICH ST., # 505				
			(Address)			,
		_				
	NEW	YORK, NY 10007 (City	State and Zip C	ode)		75. Si
		(4-7)		, <i>,</i>		OS APR SECULOR
For further info	metion (concerning this matter, please	call:	•	'	
MARCO POS	CATI		. 646	. 007.0545		AH IO: I
WARCO FOS		of Person)	at (646	837-0515 Code & Daytime To	elenhone Number)	28 2
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Enclosed is a	check fo	r the following amount:			-	Gr.
🗖 \$125,00 Filis	ng Fee	☐ \$130.00 Filing Fee & Certificate of Status	Certified C	Filing Fee & opy opy is enclosed)	\$160.00 Filing I Certificate of Status Certified Copy	
				- •	(additional copy is enclo	eed)
STREET ADDRESS:			MAILING A	DDRESS:		
Registration Section Division of Corporations		Registration Section Division of Corporations		3		
409 E. Gaines Street			P.O. Box 632	7		
	Tallah	issee, Florida 32399		Tailahasuce, F	Torida 32314	

STATE OF FLORIDA ARTICLES OF ORGANIZATION OF

AIR CAPITAL PARTNERS, LLC

These Articles of Organization of AIR CAPITAL PARTNERS, LLC, a Florida limited liability company (the "Company"), dated as of the 6th day of April, 2005, are being duly executed and filed by Marco Possati, who is authorized to form a limited liability company under the Florida Limited Liability Company Act (Chapter 608 of Florida Statutes).

ARTICLE I - Name:

The name of the limited liability Company is:

AIR CAPITAL PARTNERS, LLC

ARTICLE II - Address: The principal address and mailing address of the Company is:

295 Greenwich St., Suite 505, New York, NY 10007

ARTICLE III - Registered Agent, Registered Office and Registered Agent's Signature:

The Registered Agent and Registered Office for service of process is as follows:

Name:

Carlos Obregon

Address:

8100 SW 19 ST

Miami, Florida 33155

Having been named to accept service of process for the Company named above, at the place designated in this certificate, I agree to act in that capacity and to comply with the provisions of the Florida Limited Company Act and all other applicable laws, relative to the proper and complete performance of my duties as registered agent.

Carlos L Obregoz Registered Agent

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization as of the date first above written.

Marco Possati, Authorized Person