CAPITOL SERVICES d/b/a PARALEGAL & ATTORNEY SERVICE BUREAU, INC. (Requestor's Name) 1406 Hays Street, Suite 2 *****55.00 *****55.00 Tallahassee, FL 32301 (904) 656-3992 OFFICE USE ONLY (City, State, Zip) (Phone #)

800003127538---02/08/00--01080--019

****100.00 ****100.00

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. Palmer Ai	~ .=LLC _		
	tion Name)	(Document #)	•
2. (Corpora	tion Name)	(Document #)	= 2 0
3.	Ξ	(Document #)	OO FEB
(Comora:			B-8 HASSI
Walk in P	tion Name) lick up time	(Document #) Certified Copy Certificate of State	AM II: 00 RPORATION E. FLORIDA
NEW FILINGS Profit NonProfit Limited Liability Domestication Other	AMENDMENTS Amendment Resignation of R.A., Office Change of Registered Agen Dissolution/Withdrawal Merger		MINANA ATRICA
Annual Report Fictitious Name Name Reservation	REGISTRATION/ QUALIFICATION Foreign Limited Partnership Reinstatement Trademark Other	Exam	iner's Initials

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is: PALMER AIR, LLC
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: 3250 PEACHTREE INDUSTRIAL BOULEVAED SUITE 201 DULUTH, GEORGIA 30096 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are: United Corporate Services, Inc. Name 9200 South Dadeland Blvd.—Ste. 508 Florida street address (P.O. Box NOT acceptable) Miami FL 33156 City, State, and Zip
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 Registered agent's Signature Michael A Barr
Article IV - Management (Check box if applicable.) The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.
(An additional article must be added if an effective date is requested) Signature of a member of 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.) Phulp H. Wence, attorney Typed or printed name of signee
City, State, and Zip 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 Article IV - Management (Check box if applicable.) The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company. (An additional article travel be added if an effective date is requested) Signature of a member of ak 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.)

FILING FEES:

^{\$ 100.00} Filing Fee for Articles of Organization \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (OPTIONAL) \$ 5.00 Certificate of Status (OPTIONAL)