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To:

Division of Corporations

Fax Number : (850) 922-4003

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255

Fax Number

: (305)541-3694 : (305)541-3770

LIMITED LIABILITY COMPANY

W.L. BOW, LLC

Certificate of Status 1 Certified Copy 03 Page Count \$155.00 Estimated Charge



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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I.- NAME

The Name of Limited Liability Company is:

W.L. Bow, LLC

#### ARTICLE IL- ADDRESS

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

W.L. Bow, LLC 11010 Crescent Bay Blvd. Clermont, Florida 34711

#### ARTICLE III. - Effective Date

This Limited Liability Company shall commence its existence on the date of filing of these Articles of Organization.

#### ARTICLE IV. - Purpose

The purpose for which this Limited Liability Company is organized is as follows:

- A. To engage in the business of ownership of aircraft.
- B. To do such other things as are incidental to the purposes of this Limited Liability Company or necessary or desirable in order to accomplish them.
- C. For any other lawful purposes, for which Limited Liability Companies may be established under the Florida Statutes, subject to statutes and regulations of the laws of the State of Florida for regulating and controlling its business.

Prepared by: Michael L. Abrams, Esq. (Fla. Bar #171101) Michael L. Abrams, P.A. 121 South 61 Terrace Hollywood, Florida 33023 (954) 961-5600; (305) 621-5600

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### ARTICLE V.- Registered Agent, Registered Office, & Registered Agent's Signature

The name and the Florida street address of the registered agent are:

William L. Bow 11010 Crescent Bay Blvd. Clermont, Florida 34711 ~

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 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 Aperic's Signature

Signature of a member or 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.)

William L. Bow
Typed or printed name of signee

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