ElaCologo Odlo Requester's Name 341 Skyway Dr. Unit 10 Address U Edge Water, H. 32/32 City/State/Zip Phone # Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Pick up time _ ☐ Walk in Certified Copy Photocopy ☐ Will wait Mail out Certificate of Status **NEW FILINGS AMENDMENTS** ☐ Profit Amendment Not for Profit Resignation of R.A., Officer/Director Limited Liability ☐ Change of Registered Agent Domestication ☐ Dissolution/Withdrawal Other ☐ Merger **OTHER FILINGS** REGISTRATION/QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Reinstatement Trademark Other

Examiner's Initials

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

AIRCRAFT, LLC

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

341 SKYWAY DR, UNIT N., EDGEWATER, FL

ARTICLE I - Name:

ARTICLE II - Address:

EGGENFELLNER

The name of the Limited Liability Company is:

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
JAN L. EGGENFELLNER Name
341 SWYWIAY DR, UNIT W Florida street address (P.O. Box NOT acceptable)
EDG-EWATER FL 32/32 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.
Van Glade
Registered Agent's Signature
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)
Man Efaster F. P. P. D.
Signature of a member or an authorized representative of a member. (In accordance with section 608 408/3) Florida Statutes the execution
(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.)
JAN L. EGGENFELLNER_

Typed or printed name of signee

\$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)

Filing Fees: