Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number : (850) 205-0383

From:

Account Name : EMPIRE CORFORATE KIT COMPANY

Account Number : 072450003255 Phone : (305)634-3694 Fax Number : (305)633-9696

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# LIMITED LIABILITY COMPANY

## **JETNOMICS,LLC**

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FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

December 11, 2001

EMPIRE

SUBJECT: JETNOMICS, LLC

REF: W01000027696

SECRETARY OF STATE TALLAHASSEE, FLORIDA

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You failed to make the correction(s) requested in our previous letter.

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Document Specialist FAX Aud. #: H01000118896 Letter Number: 101A00065124

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# 401000118896

#### ARTICLES OF ORGANIZATION

#### <u>of</u>

#### JETNOMICS, LLC

The undersigned member(s) to these Articles of Organization hereby form a limited liability company under the laws of the State of Florida.

## ARTICLE I

#### NAME OF THE COMPANY

The name of this company shall be; JETNOMICS, LLC.

## **ARTICLE II**

#### PURPOSES/NATURE OF BUSINESS

The general nature of the business to be transacted by this limited liability company is any activity and/or business permitted under the laws of the United States and of the State of Florida.

#### ARTICLE\_III

#### TERM OF EXISTENCE

This limited liability company shall have perpetual existence.

#### ARTICLE IV

#### MAILING ADDRESS OF COMPANY

The mailing address of this limited liability company in the State of Florida is:

Hugo E. Dorta, P.A.

801 Brickell Avenue, Suite 905

Miami, Florida 33131

FILED SEGRETARY OF STATE TALLAHASSEE, FLORIDA

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#### ARTICLE V

#### STREET ADDRESS OF COMPANY

The street address of the principal office of this limited liability company in the State of Florida is:

Hugo E. Dorta, P.A.

801 Brickell Avenue, Suite 905

Miami, Florida 33131

#### ARTICLE VI

## **ADMISSION OF NEW MEMBERS**

The Company may admit new members as provided in the Operating Agreement of the limited liability company.

## ARTICLE VII

## AMENDMENT(S) AND/OR MODIFICATION(S)

These Articles of Organization may be amended, modified and/or changed in the manner provided for in the Operating Agreement of this limited liability company.

#### ARTICLE VIII

# REGISTERED AGENT AND REGISTERED AGENT'S ADDRESS

The Registered Agent for the said limited liability company and the registered agent's address shall be located at:

Hugo E. Dorta, P.A.

801 Brickell Avenue, Suite 905

Miami, Florida 33131

or such other place as the company shall from time to time designate, with appropriate notice being given to the Secretary of State.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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#### ARTICLE IX

# MEMBER-MANAGEMENT AND MEMBER-MANAGEMENT AUTHORITY

The limited liability company is to be managed by it's Members, and is therefore, a Member-Managed Company. The names and street addresses of the Members of the limited liability company, who, subject to the Operating Agreement, and the laws of the State of Flonda, shall be:

#### **MEMBER'S NAME/ADDRESS**

Alfredo Ezequiel Morcillo-Rosso

Hugo E. Dorta, P.A.

801 Brickell Avenue, Suite 905

Miami, Florida 33131

Alfredo Ezequiel Morcillo-Rosso

STATE OF FLORIDA

COUNTY OF MIAMI DADE

BEFORE ME, the undersigned authority, duly authorized to administer oaths and take acknowledgments, personally appeared

Alfredo Ezequiel Morcillo-Rosso

who acknowledged to having executed the foregoing instrument and (x) who is personally known to me and/or (x) who has/have produced PASSPORT as identification and who did take an oath.

Witnessed hand and seal in Miami-Dade and State of Florida aforesaid on this 23th day of NOVEMBER 2001 The Hung Enrique Dorts the Commission Co

Explicat November 26, 2004

(Sign)

Notary Public State of Florida

(Affix Notary Public's Scal)

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