

LO2000013002

CHARLES H. BOWERS  
Attorney at Law

7825 S.W. Ellipse Way  
Stuart, Florida 34997

561 223-6699  
Fax 561 223-9996

May 20, 2002

200005597072--5  
-05/22/02--01027--012  
\*\*\*\*130.00 \*\*\*\*130.00


Registration Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

Re: Sword Flight, LLC

Dear Sir or Madam:

Enclosed for filing are Articles of Organization and check  
for \$130.00 for filing fees and certificate of status for  
Sword Flight, LLC.

Sincerely,

  
Charles H. Bowers

Enclosures as stated

FILED  
02 MAY 22 AM 11:33  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

THOMAS

5/29

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is: Sword Flight, LLC

**ARTICLE II - Address:**

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

7825 S.W. Ellipse Way  
Stuart, Florida 34997

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

Charles H. Bowers  
Name

7825 S.W. Ellipse Way  
Florida street address (P.O. Box **NOT** acceptable)

Stuart, Florida 34997  
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 the 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

**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 or unauthorized 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.)

Charles H. Bowers  
Typed or printed name of signee

02 MAY 22 AM 11:33  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED