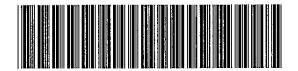
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Certified Copies	Certificates	s of Status				
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## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

SHA Avistion,	LLC .	SELLED 1.12  FILLED 1.12  FILLED 1.12
		Art of Inc. File  LTD Partnership File
		Foreign Corp. File  L.C. File
		Fictitious Name File  Trade/Service Mark
		Merger File  Art. of Amend. File  RA Resignation
		Dissolution / WithdrawalAnnual Report / Reinstatement
		Cert. Copy Photo Copy
		Certificate of Good Standing  Certificate of Status
		Certificate of Fictitious Name
		Corp Record Search  Officer Search
Signature		Fictitious Search  Fictitious Owner Search
Paguagted but		Vehicle Search  Driving Record  UCC 1 or 3 File
Requested by: Name	<u>1195 03</u> <u>10:51</u> Date Time	UCC 11 Search
Walk-In	Will Pick Up	Courier

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICL	Æ	1_	Na	me:

The name of the Limited Liability Company is:

SHA AVIATION, LLC

## ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 8000 N. FEDERAL HIGHWAY, BOCA RATON, FL 33487

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

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

JOHN M. CAPPELLER, JR.

Name

350 CAMINO GARDENS BLVD., #303

Florida street address (P.O. Box NOT acceptable)

**BOCA RATON** 

FL 33487

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 agentless provided for in Chapter 608, F.S.

Registered Agent's Signature

(An additional article must be added if an effective date is requested)

Measture of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Floridal Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

SCOTT H. ADAMS

Typed or printed name of signee

Pling Free:

\$100,00 Filing Fee for Articles of Organization

5 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

5 5.00 Certificate of Status (Optional)