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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**TRANSMITTAL LETTER
FOR LIMITED LIABILITY COMPANY**

Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

SUBJECT: American Aviation Management Solutions, L.L.C.
(Proposed name of Limited Liability Company)

Enclosed are an original and one (1) copy of the articles of organization and a check for:

 x \$125.00
Articles of Organization
& Designation of Registered Agent

FROM: James Hoehn
Name (Printed or typed)

6961 NW Hartney Way,
Address

Port Saint Lucie, Florida 34983
City, State & Zip

Daytime Telephone Number

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:
American Aviation Management Solutions, L. L. C.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:
6961 NW Hartney Way, Port Saint Lucie, Florida 34983

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

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

James Hoehn

Name

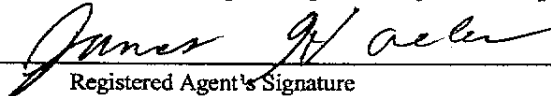
6961 NW Hartney Way

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

Port Saint Lucie, Florida 34983

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.


Registered Agent's Signature

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


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.)

James Hoehn

Typed or printed name of signee

Filing Fees:

- \$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)

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STATE OF FLORIDA
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