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(Requestor's Name)	
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PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
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. Division of Corporations ·11-13-03

ATTACHED are the Forms and ckeck to

Form a Florida Limited Liability Company

Included in ckeck amount are the Filing

Fees For Certified Copy and certificate of

STATUS

LARRY F. LOUINGOOD 3224 QUEEN PAIM DR. Edgewater FL 32141 386-426-7289

TRANSMITTAL LETTER

SUBJECT: FRANKI'N Hest + Ai'R LTD. Co.

(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

LARRY FRANKI'N Lov'N GOOD

(Name of Person)

FRANKI'N Hest + Ai'R LTD. Co.

(Firm/Company)

3224 Queen Poly Organization DR.

(Address)

Elgewater Florida 32141

(City/State and Zip Code)

For further information concerning this matter, please call:

LARRY FRANKI'N Lov'N GOOD

(Area Code & Daytime Telephone Number)

STREET ADDRESS:

TO:

Registration Section

Registration Section Division of Corporations 409 E. Gaines Street Tallahassec, Florida 32399 MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
FRANKLIN HOST + AIR LTD. CO.		
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:		
Principal Office Address: Mailing Address:		
3224 Queen Palm De. 3224 Queen Palm DR.		
Edgewater FL 32141 Edgewater FL 32141		
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are: LARRY FRANKL' LOU'NGOOD Name 3224 Queen Palm DR. Florida street address (P.O. Box NOT acceptable) EAge water 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, Florida Statutes..

Page 1 of 2 (CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	
"MGRM"	LARRY FRANKLING LOUIS 3024 QUEEN Palm DA Edgeword FL 32141
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and the second s	· P**
(Use attachment if necessary)	
NOTE: An additional article must be	added if an effective date is requested.
REQUIRED SIGNATURE:	
D 2 1	1. 2 . 0
Signature of a member or an a	uthorized representative of a member.
(In accordance with section 608. of this document constitutes an a that the facts stated herein are true.)	408(3), Florida Statutes, the execution furnation under the penalties of perjury ie.)
LARRY FRANKlin	J Louingood

<u>Filing Fees:</u> \$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)