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JW, JCH OF CCRPORATIONS TALLAHASSEE, FLORIDA

J. BRYAN JAN 9 2004

## TRANSMITTAL LETTER

	TRA	NSMITTA	L LETT	ER	CONTRACTOR CORPORATIONS SEE PLONG PL
	stration Section sion of Corporations	-			POR TO
SUBJECT:	American Autogyro of	Crystal River,	FL, LLC		TOP TO THE
	(Name	of Limited Lia	bility Compa	ny)	E. Flora
The enclosed	Articles of Organization and f	ee(s) are submit	tted for filing	•	AGE TO SERVICE OF THE PERSON O
	Please return all co	rrespondence co	oncerning this	matter to the following:	
	M. Terry Eiland				
		(Name	of Person)		<del></del>
	American Autogyro of C	rystal River, F	L, LLC		
		(Firm/	Company)		
	10150 W. Pamondeho C	ircle			
<del></del>		(Ad	idress)		·
	Crystal River, FL 34428				
		(City/State	and Zip Code)		<del>_</del>
For further in	formation concerning this mat	ter, please call:			
	M. Terry Eiland	at (	352	563-1858	
	(Name of Person)		(Arca Code	& Daytime Telephone Number	r)

STREET ADDRESS:

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

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

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ON TO SHAP	THE SCORP FLORING	4 5 M	. C.
	<i>'</i> 2	25	

ARTICLE I - Name:	
The name of the Limited Liability Company is:	1083 1083 1083 1083 1083 1083 1083 1083
American Autogyro of Crystal River, FL, LLC	46
ARTICLE II - Address:	
The mailing address and street address of the principal	al office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
10150 W. Pamondeho Circle	10150 W. Pamondeho Circle
Crystal River, FL 34428	Crystal River, FL 34428
ARTICLE III - Registered Agent, Registered Offi The name and the Florida street address of the registe	
The name and the Florida sheet address of the registr	agent are.
M. Terry Eiland	
Name	
10150 W. Pamondeho Circle	
Florida atreat address (D.O. Roy	NOT accentable)

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..

City, State, and Zip

FLORIDA

Crystal River,

Registered Agent's Signature

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:

M. Terry Eiland
10150 W. Pamondeho Circle
Crystal River, FL 34428

NOTE: An additional article must be added if an effective date is requested.

**REQUIRED SIGNATURE:** 

Signature of a member of 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.)

M. Terry Eiland

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)

