

MAY 04 2004 2:03PM

JOHN L. TOMLINSON, CRA

954-771-9336

L04000034/55

Florida Department of State
Division of Corporations
Public Access System

2004 MAY -4 A 11:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Account Name : JOHN L. TOMLINSON
Account Number : I19980000017
Phone : (954) 771-9336
Fax Number : (954) 771-9488

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DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

Planes and Parts, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

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ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

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SECRETARY OF STATE
TALLAHASSEE, FLORID**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Planes and Parts, LLC**ARTICLE II - Address:**

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

Principal Office Address:2659 NE 26th CourtFort Lauderdale, FL 33306**Mailing Address:**2659 NE 26th CourtFort Lauderdale, FL 33306**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

Milota Skral

Name

2659 NE 26th CourtFlorida street address (P.O. Box **NOT** acceptable)Fort Lauderdale, FL 33306FLORIDA

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..


Registered Agent's Signature

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA**ARTICLE IV- Manager(s) or Managing Member(s):**

The name and address of each Manager or Managing Member is as follows:

Title:**Name and Address:**

"MGR" = Manager

"MGRM" = Managing Member

MGRM

Milota Skal

2859 NE 26th Court

Fort Lauderdale, FL 33306

(Use attachment if necessary)

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

REQUIRED SIGNATURE:
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.)

MILOTA K. SRKAL

Typed or printed name of signer

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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