

L04000049010

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

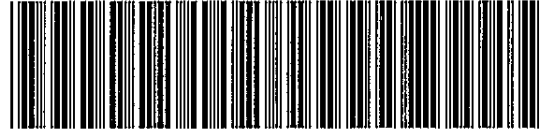
(Business Entity Name)

(Document Number)

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CORPORATION SERVICE COMPANY

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04 JUN 30 PM 4:25
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TALLAHASSEE, FLORIDA

ACCOUNT NO. : 072100000032

REFERENCE : 784341 7323010

AUTHORIZATION :

Patricia Pigante

COST LIMIT : \$ 125.00

ORDER DATE : June 29, 2004

ORDER TIME : 10:03 AM

ORDER NO. : 784341-005

CUSTOMER NO: 7323010

CUSTOMER: Ms. Linda Legault
Murphy, Reid & Pilotte, P.a.

Suite 100
340 Royal Palm Way
Palm Beach, FL 33480

DOMESTIC FILING

NAME: NORTHLAKE AIR, LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea - EXT. 2914

EXAMINER'S INITIALS: _____

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

FILED
04 JUN 30 PM 4:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

Northlake Air, LLC

ARTICLE II - Address:

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

Principal Office Address:

1263 North Lake Way

Palm Beach, FL 33480

Mailing Address:

1263 North Lake Way

Palm Beach, FL 33480

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

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

Frank T. Pilotte

Name

340 Royal Palm Way, Suite 100

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

Palm Beach, FL 33480

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

ARTICLE IV- Manager(s) or Managing Member(s):

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

Hamlin Beattie, III

1263 North Lake Way

Palm Beach, FL 33480

MGR

Lawrence LaDove

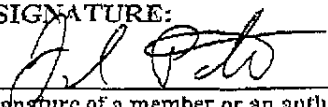
395 Caribbean Road

Palm Beach, FL 33480

(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.)

Frank T. Pilotte, Authorized Representative

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)