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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____



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06/30/04--01026--015 **160.00

Special Instructions to Filing Officer:

w04-25659

Office Use Only



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

July 6, 2004

DAVID
21515 BELHAVEN WAY
ESTERO, FL 33928

SUBJECT: P3 AVIATION
Ref. Number: W04000025659

We have received your document for P3 AVIATION and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "Ltd. Co." "L.C." or "L.L.C."

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt
Document Specialist

Letter Number: 804A00043310

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JUL 15 P 3 13

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TRANSMITTAL LETTER

FILED

TO: Registration Section
Division of Corporations

7/27/15 15 P 2:13

SUBJECT: P3 Aviation
(Name of Limited Liability Company)

REGISTRATION SECTION
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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

Please return all correspondence concerning this matter to the following:

DAVID RENAUD

(Name of Person)

P3 Aviation

(Firm/Company)

21515 Belhaven Way

(Address)

ESTERO FL 33928

(City/State and Zip Code)

For further information concerning this matter, please call

DAVID RENAUD

(Name of Person)

at

239 284-2344

(Area Code & Daytime Telephone Number)

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

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JUL 15 P 2:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

P3 AVIATION L.L.C.

ARTICLE II - Address:

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

Principal Office Address:

21515 Belhaven Way

ESTERO FL 33928

Mailing Address:

SAME

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

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

DAVID RENAUD

Name

21515 Belhaven Way

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

ESTERO

FLORIDA 33928

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..

DR

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.

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2017 JUL 15 P 2:13

CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

DAVID RENAUD

215715 BEHAVEN WAY

ESTERO FL 33426

(Use attachment if necessary)

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

REQUIRED SIGNATURE:

DAVID RENAUD

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.)

DAVID RENAUD

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)