

L04000082559

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

(Business Entity Name)

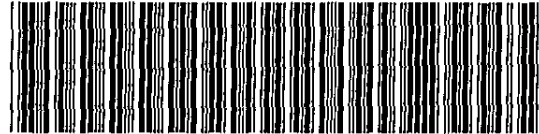
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Certified Copies 1

Certificates of Status 1

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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CLERK OF SUPERIOR COURT
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

SUBJECT: HARRIS AVIATION, LLC

Enclosed is an original and one copy of the articles of organization and a check for:

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Filing Fee	Filing Fee,	Filing Fee,	\$160.00
and Registered	Registered Agent	Registered Agent	Filing Fee,
Agent	Designation, and	Designation, and	Registered Agent
Designation	Certificate of Status	Certified Copy	Designation,
			Certified Copy, and
			Certificate of Status

From: Belinda T. France
703 E. Tennessee St.
Tallahassee, FL 32308
850-224-1040

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION
OF
HARRIS AVIATION, LLC**

The undersigned, being a natural person of at least 18 years of age and acting as the Organizer of the Limited Liability Company hereby being formed under the Chapter 608 of the Florida Statutes, does hereby adopt the following Articles of Organization for the Limited Liability Company:

FIRST: The name of the Limited Liability Company is:

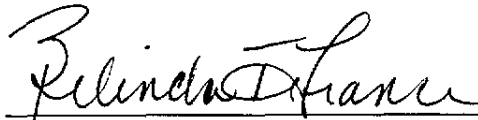
HARRIS AVIATION, LLC

SECOND: The Limited Liability Company shall continue until the occurrence of an event set forth in the Operating Agreement which causes the termination of the Limited Liability Company.

THIRD: The Limited Liability Company is organized to engage in and do any lawful act concerning any lawful business, other than banking and insurance, for which a limited liability company may be organized in accordance with the Chapter 608 of the Florida Statutes, including all powers and purposes now and hereafter permitted by law to a limited liability company.

FOURTH: The mailing address and street address of the initial registered office of the Limited Liability Company in Florida is 703 East Tennessee Street, Tallahassee, Florida 32308, and the name of the initial registered agent of the Limited Liability Company to whom process may be sent in Florida at that address is BELINDA T. FRANCE.

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, F.S.



print:

BELINDA T. FRANCE

FIFTH: The mailing address and principal office of the Limited Liability Company is 3539 Apalachee Parkway, Suite 3, #223, Tallahassee, Florida 32311.

SIXTH: The Limited Liability Company is to be managed by a Managing Member. The name and address of the initial Managing Member are: KIM HARRIS, having an address at 3539 Apalachee Parkway, Suite 3, #223, Tallahassee, Florida 32311

SEVENTH: The total amount of cash (and a description and agreed value of any property other than cash) contributed to the Limited Liability Company, as capital, by the Members is \$100.00. The allocations and distributions of the Limited Liability Company shall be made in proportion to the Members' Percentage Interests.

EIGHTH: Additional capital contributions may be made at such times and in such amounts as may hereafter may be agreed by the unanimous vote of the Members. No additional capital contributions have been agreed to by the Members at this time.

NINTH: The existing Members shall have the right to admit additional Members to the Limited Liability Company, by the unanimous vote or consent of the Members.

TENTH: The remaining Members of the Limited Liability Company, by the unanimous vote or consent of the Members (other than the Member who caused the Withdrawal Event), may continue the Limited Liability Company upon the death, retirement, resignation, expulsion, bankruptcy or dissolution of a Member or the occurrence of any other event which terminates the continued membership of a Member in the Limited Liability Company.

ELEVENTH: The name and business address of the Organizer of the Limited Liability Company are: KIM HARRIS, 3539 Apalachee Parkway, Suite 3, #223, Tallahassee, Florida 32311.

IN WITNESS WHEREOF, the undersigned has executed and acknowledged these Articles of Organization on November 15, 2004.



print: KIM HARRIS

Organizer

Return to:

Belinda T. France, Esq.
France Law Firm, P.A.
703 E. Tennessee St.
Tallahassee, FL 32308

STATE OF FLORIDA, COUNTY OF LEON, ss.

The foregoing instrument was acknowledged before me on the 15th day of November, 2004, by KIM HARRIS.

Martha C. Jencks
print: martha c. Jencks

Notary Public

My commission expires on 5-10-08

Personally Known ☒ OR Produced Identification _____
Type of Identification Produced:



SECRETARY
TALMADGE
RIDA
04 NOV 1 40
8 43

Martha C. Jencks
Commission # DD318112
Expires May 10, 2008
Borden-Troy-Fair Insurance, Inc. 800-365-7019

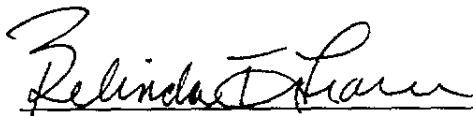
**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

Under the provisions of F.S. 608.415 or 608.507, HARRIS AVIATION, LLC., submits the following statement to designate a registered office and registered agent in the state of Florida:

1. The name of the limited liability company is HARRIS AVIATION, LLC.

2. The name and address of the registered agent in Florida are:
Belinda T. France, Esq.
The France Law Firm
703 East Tennessee Street
Tallahassee, Florida 32308

The undersigned, being the person named in the articles of organization of HARRIS AVIATION, LLC., as the registered agent of this limited liability company, hereby consents to accept service of process for the above-stated company at the place designated in the articles of organization, and accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of his or her duties, and is familiar with and accepts the obligations of the position of registered agent.



Belinda T. France
Registered Agent

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA