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Division of Corporations

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Florida Department of State
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To:

Division of Corporations
Fax Number : (850) 205-0383

From: **Vera Torres**

Account Name : LOWNDES, DROSDICK, DOSTER, KANTOR & REED, P.A.
Account Number : 072720000036
Phone : (407) 843-4600
Fax Number : (407) 843-4444

Please arrange filing of the attached Articles of Organization and return a certification to me as soon as possible. Thank you for your assistance.

LIMITED LIABILITY COMPANY

GALE AVIATION, LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

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**ARTICLES OF ORGANIZATION
OF
GALE AVIATION, LLC**

ARTICLE I - NAME

The name of this limited liability company is Gale Aviation, LLC (the "Company").

ARTICLE II - PRINCIPAL OFFICE

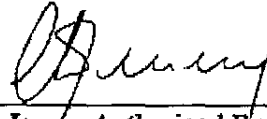
The mailing address and street address of the principal office of the Company is 103 North Lake Drive, Suite B, Ormond Beach, Florida 32174.

ARTICLE III - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the Company is 103 North Lake Drive, Suite B, Ormond Beach, Florida 32174 and the name of the initial registered agent of the Company at that address is Christian Jenny.

ARTICLE IV - MANAGEMENT

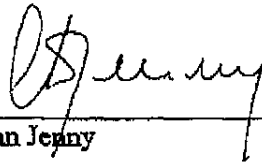
The Company is to be managed by one or more managers and is, therefore, a manager-managed company.



Christian Jenny, Authorized Representative of a
Member

ACCEPTANCE OF REGISTERED AGENT

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.



Christian Jenny

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