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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Culligan JUN 27 2005

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AirTac Enterprises LLC
(Name of Limited Liability Company)

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

Please return all correspondence concerning this matter to the following:

Phil. p Pearson
(Name of Person)

(Firm/Company)

1679 Parkside Circle
(Address)

Niceville, FL 32578
(City/State and Zip Code)

For further information concerning this matter, please call:

Phil. p Pearson
(Name of Person)

at (850) 974-0685
(Area Code & Daytime Telephone Number)

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TALLAHASSEE, FLORIDA

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee & Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee & Certified Copy
(additional copy is enclosed) | <input checked="" type="checkbox"/> \$160.00 Filing Fee, Certificate of Status & Certified Copy
(additional copy is enclosed) |
|--|--|--|--|

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**

Article I - Name

The name of the Limited Liability Company is:

AirTac Enterprises, LLC

Article II - Address

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

Principle Office Address:

1679 Parkside Circle
Niceville, Florida 32578

Mailing Address:

4516 Highway 20 East, PMB #121
Niceville, FL 32578

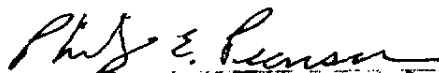
Article III – Registered Agent, Registered Office, & Registered Agent's Signature

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

**Philip E. Pearson
1679 Parkside Circle
Niceville, Florida 32578**

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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.



Registered Agent's Signature

Article IV –Manager(s) or Managing Member(s)

Title:

MGR

Name and Address:

**Philip Pearson
1679 Parkside Circle
Niceville, FL 32578**

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.)

Philip E. Pearson

Typed or printed name of signee

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