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M. HODGES

### TRANSMITTAL LETTER

Division of Co			
SUBJECT: AVIATIO			
	(Name of Limited	Liability Company)	
The enclosed Articles of	f Organization and fee(s) are su	bmitted for filing.	
Please return all corresp	ondence concerning this matter	r to the following:	
Daniel L.	Lovinger, Attorney at Law		
	(A	lame of Person)	
	a	rim/Company)	
1370 Onfari	io Street - 2000 Standard Bu	illding	
		(Address)	***************************************
Cleve	eland, OH 44113		
**************************************	(City/	State and Zip Code)	-
For further information	concerning this matter, please	call:	
Daniel L. Lovinger, Al		at ( 216 ) 621-704	
(Name	of Person)	(Area Code & Daytime	: Telephone Number)
Enclosed is a check for	or the following amount:		
\$125.00 Filing Fee	S130.00 Filing Fee & Certificate of Status	© \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	2 \$160.00 Filing Feet Certificate of Status & Certified Copy (additional copy is enclose
	EET ADDRESS:		ADDRESS:
Registration Section Division of Corporations 409 E. Gaines Street		Registration Division of P.O. Box 6	Corporations
Tallal	assee, Florida 32399		327 Florida 32314

·公司教授和代益特别,为法则把自己的教育。

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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
AVIATION HOLDINGS, LLC		
ARTICLE II - Address: The mailing address and street address of the p	rincipal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
1345 Whiteheart Avenue	1345 Whiteheart Avenue	
Marco Island, Florida 34145	Marco Island, Florida 34145	
ARTICLE III - Registered Agent, Registered The name and the Florida street address of the		
David Tschantz		
Name		
1345 Whiteheart Avenue		
Florida street address (P.O. Box NOT acceptable)		
Marco Island, Florida 34145 FI.		
City, State,	and Zip	
liability company at the place designated in	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ty. 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

(CONTINUED)

Page 1 of 2

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

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

<u> Fifle:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGRM	David Tschantz
To be a second to the second t	1345 Whiteheart Avenue
	Marco Island, Florida 34145
MGRM	Charles Glogouski
· · · · · · · · · · · · · · · · · · ·	4052 Irland Road
	Roma, Ohio 44085
(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 of this document constitute that the facts stated herei	n 608.408(3), Florida Statutes, the execution is an affirmation under the penalties of perjury in are true.)

**DAVID TSCHANTZ** 

Typed or printed name of signee

### Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)