

**Electronic Articles of Organization
For
Florida Limited Liability Company**

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FILED 8:00 AM
March 22, 2006
Sec. Of State
jbryan

Article I

The name of the Limited Liability Company is:
AVIATION INSURANCE SPECIALISTS LLC

Article II

The street address of the principal office of the Limited Liability Company is:
301 TORTUGA DRIVE
NOKOMIS, FL. US 34275

The mailing address of the Limited Liability Company is:
301 TORTUGA DRIVE
NOKOMIS, FL. US 34275

Article III

The purpose for which this Limited Liability Company is organized is:
ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:
FORM-A-CORP, INC.
100 VILLAGE SQUARE CROSSING
SUITE 103
PALM BEACH GARDENS, FL. 33410

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.

Registered Agent Signature: BY: STEPHEN LEVY (PRES.)

Article V

The name and address of managing members/managers are:

Title: MGRM
CHRISTINA PAUL
301 TORTUGA DRIVE
NOKOMIS, FL. 34275 US

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Signature of member or an authorized representative of a member

Signature: CHRISTINA PAUL