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To:

Division of Corporations

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: (850)205-0383

From: CAIL S. ANDRE

Account Name : LOWNDES, DROSDICK, DOSTER, KANTOP & REED, P.A.

Account Number : 072720000036 : (407)843-4600

Fax Number : (407)843-4444 PLEASE ARRANGE FILING OF THE ATTACHED ARTICLES OF ORGANIZATION AND RETURN A CERTIFICATION AND CERTIFICATE OF STATUS TO ME AS SOON AS POSSIBLE. THANK YOU FOR YOUR ASSISTANCE IN THIS MATTER.

CP AVIATION MA	MITED LIABIL
Certificate of Status	1
Certified Copy	1
Page Count	01
Estimated Charge	\$160.00

Electronic Filing Menu

Corporate Filing Menu

Help

H06000134825 3

# ARTICLES OF ORGANIZATION OF CP AVIATION MANAGEMENT, LLC

## ARTICLE I - NAME

The name of this limited liability company is CP AVIATION MANAGEMENT, LLC (the "Company").

### ARTICLE II - PRINCIPAL OFFICE

The mailing address and street address of the principal office of the Company is c/o Capital Partners, Inc., 512 E. Washington Street, Suite 200, Orlando, Florida 32801.

### ARTICLE III - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the Company is 215 North Eola Drive, Orlando, Florida 32801, and the name of the initial registered agent of the Company at that address is Laurence C. Hames.

ARTICLE :	IV - MANAGEMENT	N 9
The Company is to be managed by	one or more managers and is, therefore,	a maringer—S
managed company.	t wh	A SECTION
	Signature of a Member or an	Authorized
	Representative of a Member	=,
	- ~	
	Laurence C. Hames	<u>ယ့္ ဘဲ့က</u>
	Typed or Printed Name of Signer	-

#### 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.

Laurence C. Hames