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DIVISION OF CORPORATIONS

## **COVER LETTER**

TO: Registration Se Division of Con			
SUBJECT: Trans J	et Management, LLC		•
SUBJECT.		Liability Company)	
The enclosed Articles of	f Organization and fee(s) are su	ubmitted for filing.	
Please return all corresp	ondence concerning this matte	r to the following:	
Joseph Livi	io Parisi, Esq.		
	C	Name of Person)	
Trans Jet N	lanagement, LLC		
	(	Firm/Company)	
3470 Club	Center Boulevard		
•		(Address)	
Naples, F	L 34114		
	(City	State and Zip Code)	
For further information	concerning this matter, please	call:	
Joseph L. Parisi,	Esq.	at ( 239 ) 732-94	00
(Name	of Person)	(Area Code & Daytime	Telephone Number)
Enclosed is a check for	or the following amount:		
□ \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Adde Registration Section Division of Corpora Clifton Building 2661 Executive Cen Tallahassee, FL 323	tions ter Circle

ARTICLE I - Nam		~ ·	EFFECTIVE DATE
The name of the Li	mited Liability (	Company is:	05-31-061
Trans Jet Managen			
(Must end with the words	"Limited Liability Co	ompany, "Limited Compa	ny" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Add	dress:		
The mailing address	s and street addr	ess of the principal	office of the Limited Liability Company is
Principal Office A	ddress:	<u>Mail</u>	ing Address:
3470 Club Center Boule	evard	3470 (	Club Center Boulevard
Naples, Florida 34114		Naple	s, Florida 34114
Naples, Florida 34114  ARTICLE III - Re	egistered Agent mpany cannot serve a ctive Florida registrat lorida street add	, Registered Office as its own Registered Age tion.)	, & Registered Agent's Signature:  nt. You must designate an individual or another
ARTICLE III - Re (The Limited Liability Cobusiness entity with an a	egistered Agent mpany cannot serve a ctive Florida registrat	, Registered Office as its own Registered Age tion.) dress of the registered, Esquire	, & Registered Agent's Signature:  nt. You must designate an individual or another
ARTICLE III - Re (The Limited Liability Cobusiness entity with an a	egistered Agent mpany cannot serve a ctive Florida registrat lorida street add	, Registered Office as its own Registered Age tion.)	, & Registered Agent's Signature:  nt. You must designate an individual or another
ARTICLE III - Re (The Limited Liability Co business entity with an a	egistered Agent mpany cannot serve a ctive Florida registrat lorida street add Mark Woodward	, Registered Office as its own Registered Age tion.) dress of the registered, Esquire	, & Registered Agent's Signature:  nt. You must designate an individual or another  ed agent are:
ARTICLE III - Re (The Limited Liability Co business entity with an a	egistered Agent mpany cannot serve a ctive Florida registrat lorida street add Mark Woodward	Naple  Registered Office as its own Registered Age tion.)  dress of the registered Registered Name  Trail North, Suite 2	, & Registered Agent's Signature:  nt. You must designate an individual or another  ed agent are:
ARTICLE III - Re (The Limited Liability Co business entity with an a The name and the F	egistered Agent mpany cannot serve a ctive Florida registrat lorida street add Mark Woodward	Naple  Registered Office as its own Registered Age tion.)  dress of the registered Registered Name  Trail North, Suite 2 orida street address (P.4)	, & Registered Agent's Signature:  at. You must designate an individual or another  ad agent are:

d 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 (REQUIRED)

(CONTINUED) Page 1 of 2

## ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Me

Title:	Name and Address:	
"MGR" = Man		
	anaging Member	
MGR	Trans Jet Equipment, Inc.	
	3470 Club Center Boulevard	
	Naples, FL 34114	
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LE V: Effective	nt if necessary)  e date, if other than the date of filing: May 31 20  isted, the date must be specific and cannot be more than	206. (OPTIONA
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