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DIVISION OF CORPORATIONS

DIVISION OF CORPORATIONS

J. BRYAN: JUN 1 9 2006

## **COVER LETTER**

TO: Registration S Division of Co			•		
SUBJECT: Oriole	Air, LLC			•	
		d Liability Comp	any)	•	
	l			ŧ	
The enclosed Articles of	of Organization and fee(s) are s	submitted for filin	ıg.		
Please return all corresp	oondence concerning this matt	er to the followin	g:		
Christoph	ner P. Logue				
	(	Name of Person)			
Oriole Air	, LLC				
		(Firm/Company)		•	<del></del> -
1205 N	Observatory Dr.				
1200 14.	Observatory Dr.	(Address)			OF .:
		<b>,</b>			6 J
<u>Orlando,</u>	FL 32818	<del></del>			<u> </u>
	(City	/State and Zip Cod	e)		5
For further information	concerning this matter, please	call:			06 JUN 15 PH 4: 57
Christopher P.	Logue	at ( 407	, 341 <b>-</b> 86	70	:51
	of Person)	(Area Coo		elephone Number)	
Enclosed is a check for	or the following amount:				
<b>✓</b> \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 F Certified Cop (additional copy	у	\$160.00 Filing Certificate of State Certified Copy (additional copy is end	ıs &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrat Division Clifton F 2661 Ex	ourier Addression Section of Corporation Building ecutive Center see, FL 32301	ns	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company is	<b>s</b> :	
Oriole Air, LLC		
Must end with the words "Limited Liability Company, "Limited Liability Company,"	ited Company" or their abbreviation "LLC," or "L.C.,")	
ARTICLE II - Address:		
The mailing address and street address of the p	principal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
1205 N. Observatory Dr.	1205 N. Observatory Dr.	
Orlando, FL 32818	Orlando, FL 32818	
ARTICLE III - Registered Agent, Registere The Limited Liability Company cannot serve as its own Region business entity with an active Florida registration.)	Orlando, FL 32818  d Office, & Registered Agent's Signature: istered Agent. You must designate an individual or another registered agent are:	
The name and the Florida street address of the	registered agent are:	
Christopher P. Logue	<u> </u>	
Name		ar S
1205 N. Observatory D	Or. 4: ATTORNATION STATES (P.O. Box NOT acceptable)	STATE
Florida street ad	Idress (P.O. Box NOT acceptable)	5
Orlando, FL	FL 32818	
City, State,	and Zip	

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 (REQUIRED

(CONTINUED) Page 1 of 2

## 

### **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.)

Christopher P. Logue

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)