

LO60000085526

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500078671665

08/21/06--01028--016 \*\*87.50

08/29/06--01005--001 \*\*72.50

2006 AUG 29 PM 12:13  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

LO6-85526  
al

EFFECTIVE DATE

8-23-06



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 23, 2006

*8/24 10:06 - wants to file Art. 8 Org.*

NATARAJAN NARAYANAN  
12271 SW 132 CT  
MIAMI, FL 33186

SUBJECT: NARAS AVIAITON LLC  
Ref. Number: W06000037292

We have received your document for NARAS AVIAITON LLC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

UNABLE TO CONTACT YOU DIRECTLY BY TELEPHONE

Mispelled word AVIATION OR AVIAITON?

It appears the filing submitted has a typographical error in the entity name. Please verify this name and all other information contained in the filing and resubmit it for processing.

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6933.

Dale White  
Document Specialist

Letter Number: 506A00051902

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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New Filing Section

FILED

2006 AUG 29 PM 12:13  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Registration Section  
Division of Corporation  
Clifton Building  
2661 Executive centre Circle  
Tallahassee, FL: 32301

Date: 08/24/06

ATTN: DALE WHITE

Sir:

Reference is made to registration as LLC and please be advised that I made an error of completing the articles of corporation instead of articles of Organization. I have already submitted the filing for corporation of \$87.50 via check 10173 that has been credited and I am enclosing herewith the difference of amount \$72.50 via check# 10174 as the total filing fee for LLC.

I would appreciate in expediting the registration and I apologize for wrong completion of the form.

Please feel free to call me for any other queries at 305 255 4155

Thanking You



N. Narayanan  
President  
Naras Aviation LLC  
12271 S.W. 132 Ct  
Miami, FL: 33186

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2006 AUG 29 PM 12:13  
SECRETARY OF STATE  
TALLAHASSEE, FL

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** NARAS AVIATION LLC  
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

NATARAJAN NARAYANAN

(Name of Person)

NARAS AVIATION LLC

(Firm/Company)

12271 S.W. 132 CT

(Address)

MIAMI, FL: 33186

(City/State and Zip Code)

2006 AUG 29 PM 12:13  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

For further information concerning this matter, please call:

NATARAJAN NARAYANAN at ( 305 ) 255 4155  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for 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 Address**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

NARAS AVIATION LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

#### Principal Office Address:

12271 S.W. 132 CT

MIAMI, FL: 33186

#### Mailing Address:

12271 S.W. 132 CT

MIAMI, FL: 33186

### ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

NATARAJAN NARAYANAN

Name

12271 S.W. 132 CT

Florida street address (P.O. Box **NOT** acceptable)

MIAMI, FL: 33186

FL

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

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TALLAHASSEE, FLORIDA

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

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

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGR

NATARAJAN NARAYANAN

12271 S.W. 132 CT

MIAMI, FL: 33186

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TALLAHASSEE, FLORIDA

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 08/23/2006 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**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.)

NATARAJAN NARAYANAN

\_\_\_\_\_  
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)**