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| Special Instructions to | Filling Officer: |
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FILINGS, INC. TERESA ROMAN (Requestor's Name) 2805 LITTLE DEAL ROAD SECURIAL PH 3: 06 (Address) 1106 385-6735 TALLAHASSEE, FLORIDA 32308 **OFFICE USE ONLY** (City, State, Zip) (Phone #) CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Pick up time 200 Certified Copy Mail out Will wait Photocopy Certificate of Status AMENDMENTS NEW FILINGS Profit Amendment NonProfit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger REGISTRATION/ OTHER FILINGS QUALIFICATION **Annual Report** Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement

Examiner's Initials

Trademark

Other

CR2E031(10/92)

ARTICLES OF CORRECTION **FOR** FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608.4115, F.S., this document is being submitted within the required 30 business days to correct the attached articles of organization or application to transact business in Florida.

| FIRST | 2: | The name of the | limited liability com | npany is: MONTIS JETS, I | LLC |
|--------------|-------------|--|--|--------------------------------|----------------|
| SECO | <u>ND</u> : | The articles of or | rganization or the ap | plication to transact business | PECRET 3 |
| (<u>C</u> H | ECK T | THE APPROPRIA | TE BOX AND COM | PLETE THE APPLICABLE S | <u> </u> |
| X | incorr | ect, and the correc | ntement. The incorrected statement are as LL BE EVA HU | | itement is 100 |
| | 7 H. | E MEMBER SHA | LL BE PRIME R | PICH OVERSEAS, LTD | P |
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| | <u>OR</u> | | | | |
| | | efectively signed. propriate correction | | ch the document was defective | ly signed and |
| | | | | | |
| | | <u> </u> | | | |
| Dated: | | May 31st | | , 260 7 | |
| | | Ferena. | Roman | | |
| | | Signature of a | member or authorize | ed representative of a member | • |
| | | 7 <i>ER</i> | ESA ROMAN | | |
| | | | Typed or printed n | ame of signee | - |
| | | • | Filing Fee: Certified Copy: | \$25.00 \$30.00 (optional) | |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: The name of the Limite | d Liability Company is | TALLAH 2 |
|---|---|---|
| | MONTIS JETS L | |
| Must end with the words "Lim | ited Liability Company, "Lim | ited Company" or their abbreviation "LLC," or "L.C." |
| ARTICLE II - Addres | is: | OF |
| | | principal office of the Limited Liability Compan |
| Principal Office Addr | ess: | Mailing Address: |
| 2655 LEZEUNE RO | DAD | 2655 LEJEUNE ROAD |
| <i>#507</i> | • | #507 |
| | | CORAL GABLES, FLORIDA 33134 |
| CORAL GABLES, | 7LORIDA 3313 4 | COUNTY GRACES, PLOKIDA 35/34 |
| ARTICLE III - Regist The Limited Liability Compan business entity with an active | tered Agent, Registere ny cannot serve as its own Reg Florida registration.) | ed Office, & Registered Agent's Signature: istered Agent. You must designate an individual or another |
| ARTICLE III - Regist The Limited Liability Compan business entity with an active The name and the Floric | tered Agent, Registere ny cannot serve as its own Reg Florida registration.) | ed Office, & Registered Agent's Signature: istered Agent. You must designate an individual or another |
| ARTICLE III - Regist The Limited Liability Compan business entity with an active The name and the Floric | tered Agent, Registere by cannot serve as its own Reg Florida registration.) da street address of the | ed Office, & Registered Agent's Signature: istered Agent. You must designate an individual or another registered agent are: |
| ARTICLE III - Regist The Limited Liability Compan business entity with an active The name and the Flori | tered Agent, Registere by cannot serve as its own Reg Florida registration.) da street address of the FILINGS, INC. | ed Office, & Registered Agent's Signature: istered Agent. You must designate an individual or another registered agent are: |
| ARTICLE III - Regist The Limited Liability Compan business entity with an active The name and the Flori | tered Agent, Registere by cannot serve as its own Reg Florida registration.) da street address of the FILINGS, INC. Name 1732 N.W. 16th S | ed Office, & Registered Agent's Signature: istered Agent. You must designate an individual or another registered agent are: |
| ARTICLE III - Regist (The Limited Liability Compan business entity with an active) The name and the Florional Property of the | tered Agent, Registere by cannot serve as its own Reg Florida registration.) da street address of the FILINGS, INC. Name 1732 N.W. 16th S | ed Office, & Registered Agent's Signature: istered Agent. You must designate an individual or another registered agent are: |

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

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

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

| "MGR" = Manager | Name and Address: |
|--|--|
| 'MGRM" = Managing Member | |
| MGR (ONLY) | RICARDO MONTILLA |
| MYK TONLY | .2655 LEJEUNE ROAD #507 |
| | CORAL GABLES. FL. 33134 |
| TEMBER | PRIME RIDGE OVERSEAS, LTD. |
| TEMBER | |
| | 2655 LEJEUNE ROAD #507 CORAL GABLES, FL. 433134 |
| | A BRITISH VIRGIN ISLAND |
| · | INTERNATIONAL CORPORATION |
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| Use attachment if necessary) | |
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| EV: Effective date, if other that ective date is listed, the date mulays after the date of filing.) REQUIRED SIGNATURE: | n the date of filing: (OPTIC ust be specific and cannot be more than five business about Roman ember or an authorized representative of a member. |
| LE V: Effective date, if other that ective date is listed, the date mudays after the date of filing.) REQUIRED SIGNATURE: Signature of a m (In accordance with ective date, if other that are in a contained in a contained with a contained in a c | ust be specific and cannot be more than five business |

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)

Typed or printed name of signee

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