

LU7000056870

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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(Business Entity Name)

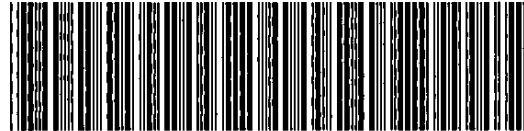
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155 Office Plaza Drive, Suite A Tallahassee, FL 32301

PHONE: (850) 216-0457; FAX: (850) 216-0460

DATE: 05-30-07

NAME: NIPPON AVIATION CREWS LLC

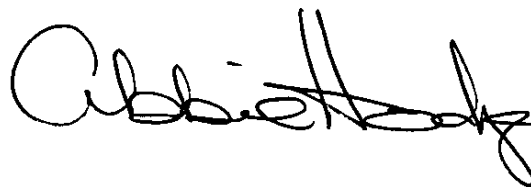
TYPE OF FILING: ARTICLES OF ORGANZIATION

COST: \$125 + \$5= \$130

RETURN: GOOD STANDING

ACCOUNT: FCA0000000015

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Nippon Aviation Crews 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:

8345 NW 66 Street

Suite 4247

Miami FL 33166-2626

Mailing Address:

8345 NW 66 Street

Suite 4247

Miami FL 33166-2626

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:

JUAN ZANOTTI

Name

8345 NW 66 Street Suite 4247

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

MIAMI

FL 33166-2626

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

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

JUAN A ZANOTTI

8345 NW 68 Street Suite 4247

Miami FL 33166-2626

MGRM

HECTOR DANIEL FRONZO

Building 79 North Boundary Road NCA FCD

Jamaica NY 11430-1814

MGRM

PABLO H ZANOTTI

8345 NW 68 Street Suite 4247

Miami FL 33166-2626

MGR

ISAMU BABA

1-37-5 Ozenjigashi

Asao-ku, Kawasaki 215-0013 JAPAN

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (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.)

JUAN A ZANOTTI

Typed or printed name of signer

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)

ARTICLE IV Manager(s) or Managing Member(s) ATTACHMENT

Title

Name and Address

MGR

ALEJANDRO BASTIN
Tres de Febrero 1256 Piso 21 Dep C
Buenos Aires ARGENTINA (1426)

MGRM

JORGE LUIS RAGONESE
Cuenca 23
Buenos Aires ARGENTINA (1406)