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SECRETARY OF STATE
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EXAMINER

. COVER LETTER

Division of Corporations	
SUBJECT: L'Aviateur LLC	
(Name of Limited L	iability Company)
The enclosed Articles of Organization and fee(s) are subn	nitted for filing.
Please return all correspondence concerning this matter to	the following:
Franck R Martin	•
	me of Person)
L'Aviateur LLC	क्राहरूक्क का विकास के किया है। इस्ताहरूक्क के अपने के किया किया किया
(Fire	m/Company)
300 Lynbrook Circle Unit #	# 201 6 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
(# 201 (Address)
Venice, FL 34292	•
	ate and Zip Code)
For further information concerning this matter, please call	d:
Franck R Martin	, 941 ₃ 408-8054
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	2008 SEC TALL
\$125.00 Filing Fee \$\infty\$\$\$\$130.00 Filing Fee & \$\infty\$\$\$	
Certificate of Status Garage Angel CCK Disconsi (104 a)	
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 Compa	any is:
L'Aviateur LLC	
(Must end with the words "Limite	ed Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of	f the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
300 Lynbrook Circle Unit #201 Venice, FL 34292	300 Lynbrook Circle Unit #201 Venice, FL 34292
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of the company cannot serve as its own business entity with an active Florida registration.)	istered Office, & Registered Agent's Signature: on Registered Agent. You must designate an individual or another of the registered agent are:
Franck R Mar	Name
Venice, City, Having been named as registered agent a liability company at the place designal registered agent and agree to act in this constatutes relating to the proper and comp	Circle Unit # 201 Treet address (P.O. Box NOT acceptable) FL 34292 State, and Zip The state of process for the above stated limited and the certificate, I hereby accept the appointment as apacity. I further agree to comply with the provisions of all all the performance of my duties, and I am familiarly the and as registered agent as provided for in Chapter 608, F.S

(CONTINUED)
Page 1 of 2

Registered Agent's Signature (REQUIRED)

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Franck R Martin 300 Lynbrook Circle Unit #201 Venice, FL 34292
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(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: April 07, 2008. (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.)

Franck R Martin

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)

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