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From:

Account Name : BUSINESS FILINGS

Account Number : 105256001620 Enone : (608)827-5300
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### FLORIDA/FOREIGN LIMITED LIABILITY CO.

#### Pogo Charters LLC

Certificate of Status	0	D. BRUCE
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## FAX AUDIT # 10 8000 2644093

# ARTICLES OF ORGANIZATION OF Pogo Charters LLC

ARTICLE I

NAME

The name of the limited liability company shall be: Pogo Charters LLC

ARTICLE II

PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 601 Longwood Markham Rd., Sanford, Florida 32771.

#### ARTICLE III INITIAI

INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Richard Honsa, 601 Longwood Markham Rd., Sanford, Florida 32771. Located in the County of Seminole.

#### ARTICLE IV

DURATION

The duration for the limited liability company shall be: Perpetual.

#### ARTICLE V

MANAGERS/MEMBERS

The management of the limited liability company is reserved for the Members and the name and dress of the member of the Limited Liability Company is:

Richard Honsa, 601 Longwood Markham Rd., Sanford, Florida 32771

Date: November 21, 2008

Business Filings Incorporated, Organizer

Mark Williams, A.V.P.

Authorized Representative

Prepared by Mark Williams, Business Filings Incorporated, 8040 Excelsior Dr., Suite 200, Madison,

WI 53717

(608) 827-5300

FAX AUDIT # \_\_ +108000 DLL 4093

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: Pogo Charters LLC

The name and address of the registered agent and office is Richard Honsa, 601 Longwood Markham Rd., Sanford, Florida 32771. Located in the County of Seminole.

Having been named as registered agent and to accept service of process for the above stated 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.

Signature:

Di Aland House

Date: 12/1/08

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SECRETARY OF STATE
FALLAHASSEE, FLORIDA

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