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C. LEWIS
FEB 2 7 2009
EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: E Air Aviation Services U.C. (Name of Limited Liability Company)
(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:
E. T.
Eric Johnson (Name of Person)
(Firm/Company)
1715 Mayo St
(Address)
Hollywood FL 33020 (City/State and Zin Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
Errce Johnson at (786) 525-1453 (Name of Person) (Area Code & Daytime Telephone Number)
(Their coac to East time to approve Training)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\times \text{\$130.00 Filing Fee & Status}\$\$ Certificate of Status \$\text{Certified Copy (additional copy is enclosed)}} Certified Copy (additional copy is enclosed)
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTollahassee FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
F Air Aviation Sacre	v •• 1/C
E Air Aviation Serv (Must end with the words "Limited Liability	Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the prin	cipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
	1.00
1715 Mayo St Hollywood F1 33020	1715 Mayo St Hollywood F1 33020
Hollywood Fl 33020	16 lywood F1 33020
ARTICLE III - Registered Agent, Registered (Office, & Registered Agent's Signature:
(The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	
business entity with an active Florida registration.)	
The name and the Florida street address of the reg	gistered agent are:
Ecic Johnson	
Eric Johnson Name	HE B
1715 A Ch	55 P
Planidaktraat addra	ss (P.O. Box NOT acceptable)
riorida-street addre	ss (P.O. Box NOT acceptable) FL 33020
Hollywood City, State, and	FL 33020 SE E
City, State, and	1 Zip
	cept service of process for the above stated limited
· · · · · · · · · · · · · · · · · · ·	s certificate, I hereby accept the appointment as
	I further agree to comply with the provisions of all formance of my duties, and I am familiar with and
	ered agent as provided for in Chapter 608, F.S
, , , , , , , , , , , , , , , , , , , ,	2 province you in Onapier 600, 1 ibii

Registered Agent's Signature (REQUIRED)

FILED

<u>Title:</u> "MGR" = Mana "MGRM" = Ma		Name and Address:	SECRETAR TALLAHASS	Y (if o SEE.FL
MGR		Eric Johnson 1715 Mayo S 160/4/2000 F1	+	
				
(Use attachment	if necessary)			
CLE V: Effective ffective date is lid days after the d	date, if other than the disted, the date must be late of filing.)	date of filing: specific and cannot be more		
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