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(Address)

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DAVID P. JOHNSON  
ATTORNEY AND COUNSELOR AT LAW  
2201 RINGLING BOULEVARD  
SUITE 104  
SARASOTA, FLORIDA 34237

MEMBER OF FLORIDA  
AND MICHIGAN BARS

CERTIFIED PUBLIC ACCOUNTANT

CHARTERED LIFE UNDERWRITER

CHARTERED FINANCIAL CONSULTANT

TELEPHONE: (941) 365-0118

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EMAIL: dpjesq@verizon.net

BOARD CERTIFIED  
TAX LAWYER

BOARD CERTIFIED  
WILLS, TRUSTS &  
ESTATES LAWYER

March 31, 2009

Registration Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, Florida 32314

**RE: CUSTOM AERIAL IMAGING, LLC**

The enclosed Articles of Organization and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

David P. Johnson, Esq.  
2201 Ringling Boulevard  
Suite 104  
Sarasota, Florida 34237

For further information concerning this matter, please call:

David P. Johnson, Esq. at (941) 365-0118.

Enclosed is a check for the following amount:

\$160 for Filing Fee, Certificate of Status & Certified Copy.

If you have any questions, do not hesitate to contact me.

Very truly yours,



DAVID P. JOHNSON

Enclosures

DPJ:msb

**ARTICLES OF ORGANIZATION  
OF  
CUSTOM AERIAL IMAGING, LLC**

**ARTICLE I**

**Name**

The name of the Limited Liability Company is CUSTOM AERIAL IMAGING, LLC.

**ARTICLE II**

**Address**

The mailing address and street address of the principal office of the Limited Liability Company is:

**Principal Office Address:**

240 Willow Ave  
Anna Maria, FL 34216

**Mailing Address:**

P.O. Box 868  
Anna Maria, FL 34216

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DIVISION OF CORPORATIONS  
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**ARTICLE III**

**Registered Agent, Registered Office & Resident Agents Signature**

The name and the Florida street address of the registered agent are:

TROY MORGAN  
240 Willow Ave.  
Anna Maria, FL 34216

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, Florida Statutes.

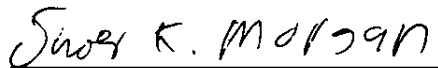
  
TROY MORGAN

**ARTICLE IV**  
**Managers or Managing Members**

The Limited Liability Company is a manager-managed Limited Liability Company. The name and address of each Manager or Managing Member is:

TROY MORGAN	MGRM	240 Willow Ave.
		Anna Maria, FL 34216

In accordance with F.S. 608.408(3), the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

  
\_\_\_\_\_  
TROY MORGAN  
Managing Member