

Division of Corporations

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : HUBCO
Account Number : 104662003400
Phone : (516) 935-3940
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: johnbdale@sprintmail.com

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10 FEB 18 AM 8:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Wheels Up Enterprise LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

S. HAWKES
FEB 19 2010
EXAMINER

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: **Wheels Up Enterprise LLC**

ARTICLE II - Address

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

Principal Office Address:

Mailing Address:

2033 Crosscreek Court

2033 Crosscreek Court

Oviedo, FL 32766

Oviedo, FL 32766

ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature

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

John B. Dale

Name

2033 Crosscreek Court

(P.O. Box or Mail Drop Box NOT Acceptable)

Oviedo, FL 32766

(City / State / 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 - John B. Dale

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

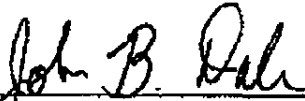
John B. Dale - 2033 Crosscreek Court, Oviedo, FL 32766

MGRM

Kimberly A. Dale - 2033 Crosscreek Court, Oviedo, FL 32766

(Use attachment if necessary)

REQUIRED SIGNATURE:



Signature of a member or 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.)

John B. Dale

Typed or printed name of signee

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