

L12000097717

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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Certified Copies _____ Certificates of Status _____

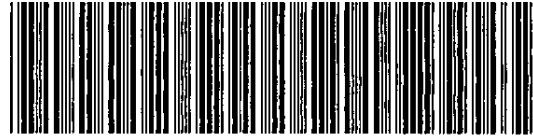
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DIVISION OF CORPORATIONS
12 JUL 27 PM 1:49

MILLER McCARTY LAW GROUP

ATTORNEYS AND COUNSELORS
36700 WOODWARD AVENUE, SUITE 105
BLOOMFIELD HILLS, MICHIGAN 48304-0926

(248) 646-9076

(248) 646-4514 Fax

David H. Miller, P.C.
Jeffrey T. McCarty, P.C.
Darnell Law Firm, P.L.L.C.

Of Counsel: Clyde B. Pritchard

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July 23, 2012

Registration Section
Florida Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

**RE: Paragon Flight Charter, L.L.C.
Our File No. 8325-12**

Dear Sir/Madam:

Accompanying this correspondence, you will find Articles of Organization for a Florida Limited Liability Company to be known by the name of Paragon Flight Charter, LLC. You will also find the required cover letter and the writer's check in the amount of \$125.00 made payable to the Florida Department of State for filing fees. When filed, I would appreciate receiving your acknowledgment of filing. Thank you in advance for your cooperation.

Yours truly,

David H. Miller

DHM/ec
Enc.

cc: Mr. Kevin Schoensee, w/out enc., via e-mail
Mr. Christopher Schoensee, w/out enc., via e-mail
Mr. Jerry Fowler, w/out enc., via e-mail
Mr. Jeffrey Wolf, w/out enc., via e-mail

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Paragon Flight Charter, L.L.C.
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:

David H. Miller, Esquire

Name of Person

Miller McCarty Law Group

Firm/Company

36700 Woodward Ave., Suite 105

Address

Bloomfield Hills, Michigan 48304-0926

City/State and Zip Code

jwolf@paragonflight.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David H. Miller, Esquire at (248) 646-9076
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address
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

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Paragon Flight Charter, L.L.C.

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

222 Industrial Blvd. Ste. 182
Naples, FL 34104

Mailing Address:

222 Industrial Blvd. Ste. 182
Naples, FL 34104

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Jeffrey Wolf

Name

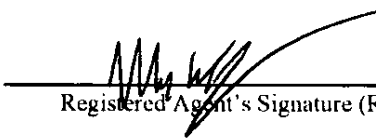
222 Industrial Blvd. Ste. 182

Florida street address (P.O. Box **NOT** acceptable)

Naples, FL 34104

City, State, and 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 (REQUIRED)

(CONTINUED)

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Jeffrey Wolf

222 Naples Industrial Blvd. Ste. 182

Naples, FL 34104

MGRM

Christopher Schoensee

511 Danley

Fort Myers, FL 33907

MGRM

Sarah Schoensee

511 Danley

Fort Myers, FL 33907

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____. (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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Jeffrey Wolf

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)