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| (Re | equestor's Name) | |
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| (Ad | ldress) | |
| (Cit | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL. |
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| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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B. BOSTICK SEP **0 4** 2013

EXAMINER

(850) 245-6051.

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT

Falcon Shares 197 LLC

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:

Richard Ianieri

Name of Person

Falcon Shares 197 LLC

Firm/Company

1401 N.E. 10th Street

Address

Pompano Beach FL 33060

City/State and Zip Code

rschaller@majesticjet.com

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

For further information concerning this matter, please call:

Richard Schaller

.850

797-8597

Area Code & Daytime Telephone Number

AUIS SEP -

Name of Person

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 F&C, 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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

| The name of the Limited Liability Company i | is: | | | |
|---|--|--|----------------------------|-------------------------|
| Falcon Shares 197 LLC | | | | |
| (Must end with the words "Limited Liz | ability Company, "L.L.C.," or "LLC.") | | , | |
| ARTICLE II - Address: The mailing address and street address of the | principal office of the Limited L | iability C | ompa | ny is: |
| Principal Office Address: | Mailing Address: | | | |
| 1401 N.E. 10th Street | 1401 N.E. 10th Street | | | |
| Pompano Beach FL 33060 | Pompano Beach FL 33060 | | <u>.</u> | |
| | • | | | |
| ARTICLE III - Registered Agent, Register The Limited Liability Company cannot serve as its own Registration.) The name and the Florida street address of the Richard lanieri Nam 1401 N.E. 10th Street Florida street a | gistered Agent. You must designate an indiverse registered agent are: | | | |
| Pompano Beach | _{El} 33060 | | | |
| City, | State, and Zip | | | |
| Having been named as registered agent and a liability company at the place designated is registered agent and agree to act in this cap all statutes relating to the proper and compand accept the obligations of my position as | in this certificate, I hereby accept accept accept accept. I further agree to comply we blete performance of my duties, and registered agent as provided for a | the appoi vith the pi d I am fai | ntmen rovisio miliar | nt as ons of with |

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Page 1 of 2

| <u>Title:</u> | | Name and Address: | |
|--|--|--|------------|
| "MGR" = Manager | | | |
| "MGRM" = Managir | ng Member | | |
| MGR | | RICHARD IANIERI | |
| _ | | 1401 N.E. 10th Street | |
| | | Pompano Beach FL 33060 | |
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| LE V: Effective date ffective date is listed or 90 days after the | e, if other than the d, the date must date of filing.) | date of filing: (OPT | IONA |
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| LE V: Effective date ffective date is lister or 90 days after the REQUIRED SIGN. Sig (In accorda constitutes I am aware constitutes | e, if other than the d, the date must date of filing.) ATURE: Grature of a member nee with section 608, an affirmation under that any false inform | date of filing: (OPT be specific and cannot be more than five by (OPT or an authorized representative of a member. 408(3), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are truation submitted in a document to the Department of Statutes. | IONA usine |

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)\$ 5.00 Certificate of Status (Optional)