

L13000142073

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

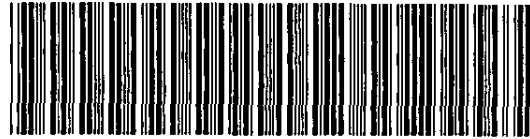
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Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W13-50631

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09/11/13--01013--020 **125.00

EFFECTIVE DATE 09-05-13

FILED
2013 SEP 11 PM 1:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BOSTICK
OCT - 8 2013
EXAMINER

(850) 245-6051.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ROBERTS AIR SOUTH - 2013, 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:

John R. Roberts Jr, Charles McLean, Constantine J.
Name of Person Bartholomew

Roberts Air South - 2013, LLC
Firm/Company

28701 SW 219th Avenue
Address

Homestead, FL 33030
City/State and Zip Code

Inh156@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Charles McLean at (305) 246-0179
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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TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Roberts Air South 2013, LLC.

(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:

28701 SW 219th Avenue
Homestead, FL 33030

Mailing Address:

28701 S.W. 219th Avenue
Homestead, FL 33030

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:

Charles McLean

Name

28701 S.W. 219th Avenue

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

Homestead, FL 33030

City, State, and Zip

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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)

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:

MGR

Roberts John R. JR
28701 SW 219th Ave
Homestead, FL 33030

MGRM

Charles McLean
28701 SW 219th Ave
Homestead, FL 33030

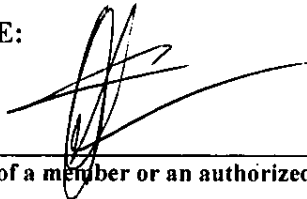
MGRM

Constantine John Bartholomew
28701 SW 219th Ave
Homestead, FL 33030

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 09-05-13 (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.)

Charles McLEAN

Typed or printed name of signer

SECRETARY OF
TALLAHASSEE
SEP 11 2013

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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)



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 12, 2013

CHARLES MCLEAN
28701 SW 219TH AVENUE
HOMESTEAD, FL 33030

SUBJECT: ROBERTS AIR SOUTH INC. 2013, LLC
Ref. Number: W13000050631

FILED
2013 SEP 11 PM 1:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for ROBERTS AIR SOUTH INC. 2013, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the entity cannot include "INC." This word/abbreviation is readily associated with or is commonly used to denote another type of entity. Please amend your document throughout accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Barbara Bostick
Regulatory Specialist II

Letter Number: 213A00021533