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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019 Phone : (305)552-5973 Fax Number : (305)220-1440

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FLORIDA LIMITED LIABILITY CO. SUNSET AVIATION LLC

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Help

B. BOSTICK

EXAMINER

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FROM: TO:3052201440 11/05/2013 13:15:27 #6927 P.002/002

00/17/2091 03:24

#2017 P. 001/002

H13000245495

November 5th 2013

Florida Department of State

Attention: New Filings' Section

To whom it may concern:

This is to advise you that the owners of SunSet Aviation Inc.

of Doc# P1000043836 are the same owners of the attached articles of Otophization.

Thank you for your help in this matter.

Very sincerely,

- 2013 NOV -5 AM 9: 43

FROM: TQ:3052201440 11/05/2013 13:15:18 #6927 P.001/002

08/17/2031 03:24

#2017 P.002/002

413000245495

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY ARTICLE I - Name: The name of the Limited Liability Company is: ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Mailing Address: 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 Plorida registratron.) The name and the Florida street address of the registered agent are: 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.

(CONTINUED)
Page 1 of 2

H13000245495.

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

,	Title: "MGR" = Manager	Name and Address:		
	"MGRM" = Managi	ng Member		
	MGRM	3517 NW 115TH AVE		
	NACONA	Miami FL 33178		
	MGRM	JORGE MESA. 3517 NW 115TH AVE		
		Miami FL 33178	٠,	
	(Use attachment if r	necessary)		
ARTIO	CLE V: Effective date	e, if other than the date of filing: (OPTIONA I, the date must be specific and cannot be more than five business day	L) s prior	
to or 9	0 days after the date	of filing.)	•	
REQUIRED SIGNATURES				
	THIS CALL	ATURE		
.e.,		another of a member or an authorized representative of a member.)	
٠	ſΊ	n accordance with section 608.408(3), Florida Statutes, the execution	. : :	
	,	that the facts stated herein are true.) TORGE MESA	0. . 0	
	-	Typed or printed name of signee	-	

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