(Re	equestor's Name)	
(Ac	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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B. BOSTICK

JUN - 2 2014

EXAMINER

COVER LETTER

May 23, 2014

TO:	Registration Division of C						
SUBJI	ECT: <u>Highlan</u>	d 597 LLC Name of Lin	nited Liability Company				
The en	closed Articles	of Organization and fee(s) ar	re submitted for filing.				
Please	return all corres	pondence concerning this m	atter to the following:				
	Gerald St	nerman	Name of Person				
			Name of Person				
	Greenwic	h Highland Aviation LLC	Firm/Company				
	601 Herit	age Drive	Address				
	Jupiter, F	L 33458				20.	
	<u> </u>	C	City/State and Zip Code		,	-: 	•
6					٠,	:	
73	cc@aol.com	E-mail address: (to be use	d for future annual report notifica	tion)		د ، لـــ	
For fur	ther information	concerning this matter, plea	ase call:			Ü	~
					٠	뎆	
Geral	d Sherman Nam	e of Person	561) 214-8157 Area Code Daytime Tel	lephone Numbe	r		
Enclos	ed is a check for	the following amount:					
□ \$125.0	00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	✓\$160.00 Fi Certificate Certified C (additional co	e of Sta Copy	itus &	ed)

1. 2.

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

Highland 597 LLC				
(Must end v	ith the words "Lim	ited Liability Company, "L.L.C.,	" or "LLC.")	
ARTICLE II - Address: The mailing address and street ad	dress of the princip	al office of the Limited Liability	Company is:	
Principal Office Address:		Mailing Address:		
601 Heritage Drive		601 Heritage Drive		
(The Limited Liability Company	annot serve as its o	own Registered Agent. You must		or
ARTICLE III - Registered Ages (The Limited Liability Company another business entity with an action of the name and the Florida street a	annot serve as its of tive Florida registr ddress of the registe	ce, & Registered Agent's Signa own Registered Agent. You must ation.)		or * { } ;
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(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

<u> Citle:</u>	Name and Address:	
AMBR" = Authorized Member		
MGR" = Manager		
MGRM	Gerald Sherman	
	18288 SE Heritage Drive	
	Jupiter, FL 33469	
MGRM	Stuart Peebles	
	211 N. Union Street	
	Alexandria, VA 22314	
•		
Use attachment if necessary)		
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V: Effective date, if other than the date of ctive date is listed, the date must be speciffiling.) VI: Other provisions, if any.	filing: (OPTION fic and cannot be more than five business days pri	NAL) ior to or 9
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ARTICLE IV-