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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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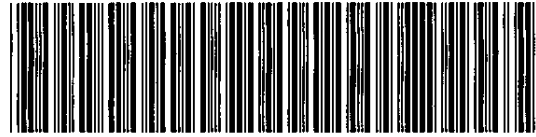
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# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

American Aviation Flight Academy, LLC

Signature \_\_\_\_\_

Requested by: SETH

10/29/14

Name \_\_\_\_\_

Date \_\_\_\_\_

Time \_\_\_\_\_

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\_\_\_\_ Art of Inc. File \_\_\_\_\_  
\_\_\_\_ LTD Partnership File \_\_\_\_\_  
\_\_\_\_ Foreign Corp. File \_\_\_\_\_  
\_\_\_\_ L.C. File \_\_\_\_\_  
\_\_\_\_ Fictitious Name File \_\_\_\_\_  
\_\_\_\_ Trade/Service Mark \_\_\_\_\_  
\_\_\_\_ Merger File \_\_\_\_\_  
\_\_\_\_ Art. of Amend. File \_\_\_\_\_  
\_\_\_\_ RA Resignation \_\_\_\_\_  
\_\_\_\_ Dissolution / Withdrawal \_\_\_\_\_  
\_\_\_\_ Annual Report / Reinstatement \_\_\_\_\_  
X \_\_\_\_\_ Cert. Copy \_\_\_\_\_  
\_\_\_\_ Photo Copy \_\_\_\_\_  
\_\_\_\_ Certificate of Good Standing \_\_\_\_\_  
\_\_\_\_ Certificate of Status \_\_\_\_\_  
\_\_\_\_ Certificate of Fictitious Name \_\_\_\_\_  
\_\_\_\_ Corp Record Search \_\_\_\_\_  
\_\_\_\_ Officer Search \_\_\_\_\_  
\_\_\_\_ Fictitious Search \_\_\_\_\_  
\_\_\_\_ Fictitious Owner Search \_\_\_\_\_  
\_\_\_\_ Vehicle Search \_\_\_\_\_  
\_\_\_\_ Driving Record \_\_\_\_\_  
\_\_\_\_ UCC 1 or 3 File \_\_\_\_\_  
\_\_\_\_ UCC 11 Search \_\_\_\_\_  
\_\_\_\_ UCC 11 Retrieval \_\_\_\_\_  
\_\_\_\_ Courier \_\_\_\_\_

**ARTICLES OF ORGANIZATION**  
**OF**  
**AMERICAN AVIATION FLIGHT ACADEMY, LLC**

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The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, Florida Statutes Chapter 605, as amended, hereby makes, acknowledges and files the following Articles of Organization.

**ARTICLE I**  
**NAME AND PURPOSE**

The name of the Limited Liability Company is American Aviation Flight Academy, LLC (the "Company"). The purpose of the company shall be to conduct any and all legal and lawful activities.

**ARTICLE II**  
**ADDRESS**

The mailing address and street address of the principal office of the Company is 2495 Broad Street, Brooksville, Florida 34604.

**ARTICLE III**  
**DURATION**

The company shall commence its existence on the date these Articles of Organization are executed by the organizer/member. The Company's existence shall be perpetual, unless the company is earlier dissolved as provided in these Articles of Organization.

**ARTICLE IV**  
**REGISTERED OFFICE, AGENT AND ADDRESS**

The name and street address of the registered agent of the Company in the State of Florida is:

Name

Address

Robert Allen Morris, Jr.

129 N. Main Street  
Brooksville, Florida 34601

**ARTICLE V**  
**ADMISSION OF NEW MEMBERS**

No additional members shall be admitted to the Company except with the unanimous written consent of all the members of the Company and on such terms and conditions as shall be

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determined by all the members. A member may transfer his or her interest in the Company as set forth in the regulations of the Company, but the transferee shall have no right to participate in the management of the business and affairs of the Company or become a member unless all the other members of the Company other than the member proposing to dispose of his or her interest approve of the proposed transfer by unanimous written consent.

#### **ARTICLE VI** **MANAGEMENT**

The Company shall be managed by its members in accordance with regulations or operating agreement adopted by the members for the management of the business and affairs of the Company. These regulations or operating agreement may contain any provisions for the regulation and management of the affairs of the Company not inconsistent with law or these Articles of Organization. The initial member is John Petrick.

IN WITNESS WHEREOF, the undersigned member has made and subscribed these Articles of Organization for the foregoing uses and purposes this 22 day of October 2014.

  
\_\_\_\_\_  
John Petrick, Member

#### **CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 605, Florida Statutes, the undersigned submits the following statement to designate a registered office and registered agent in the State of Florida.

1. The name of the Company is American Aviation Flight Academy, LLC.
2. The name and street address of the registered agent and office are:

**Name**

Robert Allen Morris, Jr.  
Registered Agent

**Address**

129 N. Main Street  
Brooksville, Florida 34601

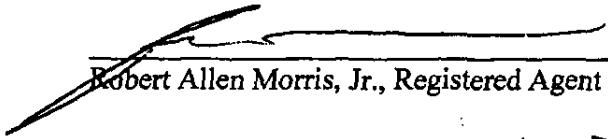
Dated: October 22 2014

  
\_\_\_\_\_  
John Petrick, Member

## REGISTERED AGENT'S ACCEPTANCE

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, the undersigned hereby accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties, and is familiar with and accepts the obligations of its position as registered agent as provided for in Chapter 605, Florida Statutes.

Dated: October 22, 2014.

  
Robert Allen Morris, Jr., Registered Agent

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