

L15000110989

(Requestor's Name)

(Address)

(Address) -

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

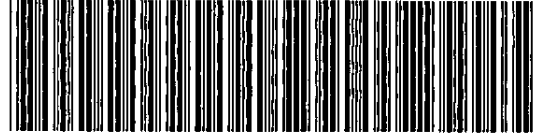
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06/29/15--01002--015 **125.00

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15 JUN 29 PM 3:02
CLERK OF SUPERIOR COURT
ALABAMA

7/1/15

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: **American Jet Support, LLC**

ARTICLE II - Address

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

**14532 SW 129 Street
Miami, Florida 33186**

Mailing Address:

**14532 SW 129 Street
Miami, Florida 33186**

ARTICLE III - Registered Agent, Registered Office & Registered Agents 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 of the Florida street address of the registered agent are:

Angelo M. Martin

Name

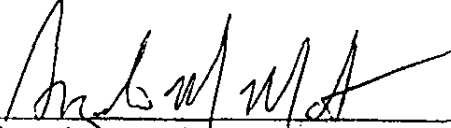
14532 SW 129 Street

Florida Street Address (P.O. Box **NOT** acceptable)

Miami, Florida 33186

City, State, and Zip

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 605, F.S.



Registered Agents Signature (Required)

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ARTICLE IV -

The name and address of each person authorized to manage and control the Limited Liability Company

Title

Name and Address

"AMBR"- Authorized Member

"MGR" - Manager

MGR

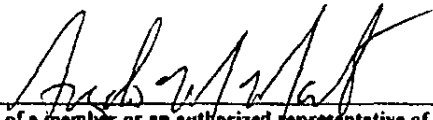
Angelo M. Martin
14532 SW 129 Street
Miami, Florida 33186

Article V: Effective date, if other than the date of filing: _____ (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).

Article VI: Other provisions, if any

The Manager may designate additional managers and/or parties authorized to conduct banking on behalf of the limited liability company.

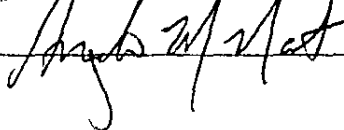
REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(In accordance with section 605.0203(1)(b), 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 §817.155.).

Angelo M. Martin, Authorized Representative



DEPARTMENT OF STATE
OFFICE OF REVENUE
TALLAHASSEE, FLORIDA 32399-0001

15 JUN 29 PM 3:02

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