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| (Re | equestor's Name) | |
|-------------------------|-------------------|-------------|
| (Ad | ldress) | |
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| (Cit | ty/State/Zip/Phon | e #) |
| PICK-UP | WAIT | MAIL |
| (Bu | siness Entity Nar | me) |
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| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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COVER LETTER

| | egistration Section vision of Corporations | | | | | |
|-----------------------------------|-----------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|
| SUBJECT: | Aerodiesel Aviation Services, LL | .c | | | | |
| Name of Limited Liability Company | | | | | | |
| The enclose | ed Articles of Organization and fee(s | s) are submitted for filing. | | | | |
| Please retur | n all correspondence concerning thi | s matter to the following: | | | | |
| | Alejandro Bristol | | | | | |
| | | Name of Person | | | | |
| | Aerodiesel Aviation Servcies, LLC | | | | | |
| | | Firm/Company | | | | |
| | 3150 SW 137 Terr | | | | | |
| | | Address | | | | |
| | Davie, FL 33330 | | | | | |
| n | nsfroggie19@aol.com | City/State and Zip Code | | | | |
| | · · · · · · · · · · · · · · · · · · · | used for future annual report notification) | | | | |
| For further in | formation concerning this matter, pl | lease call: | | | | |
| 1 | Alejandro Bristol | 561 414-6711 | | | | |
| - | Name of Person | Area Code Daytime Telephone Number | | | | |
| Enclosed is | a check for the following amount: | | | | | |
| \$125.00 Fit | _ | \$155.00 Filing Fee & Securificate Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) | | | | |
| | Mailing Address | Street Address | | | | |
| | New Filing Section Division of Corporations | New Filing Section Division of Corporations | | | | |
| | P.O. Box 6327 Tallahassee, FL 32314 | Clifton Building 2661 Executive Center Circle | | | | |

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: The name of the Limited Liabil | ity Company is: | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------|-----------------------------------------------|-------------------------------------------------------------------------------------------------------|-----------------------------------|
| | esel Aviahon S | | | |
| ARTICLE II - Address: The mailing address and street a | address of the principal o | ffice of the Limited | Liability Company is: | |
| <u>Princip</u> | oal Office Address: | | Mailing Address: | 6-19-19-00 |
| 701-2 NE 10 ST Pompano Beach, FL | . 33060 | |) SW 137 Terr ie, FI 33330 | |
| | | | | OIT. |
| (The Limited Liability Company another business entity with an The name and the Florida street | active Florida registratio | on.) | . va mase designate an marria | |
| | Dabatt Wiener | Name | | |
| | 117 Lake Emerald A | ot 101 | | |
| | Florida street addres | | cceptable) | |
| | Oakland Park | FL | 33309 | |
| | City | State | Zip | |
| Having been named as registered place designated in this certificate further agree to comply with the p am familiar with and accept the o | , I hereby accept the approvisions of all statutes rebligations of my position | ointment as register clating to the proper | ed agent and agree to act in this and complete performance of n as provided for in Chapter 605, | s capacity. I ny duties, and I |
| | | (CONTINUED) | | |

Page 1 of 2

| <u>Title:</u> "AMBR" = Authorized Member | Name and Address: | 16 |
|--------------------------------------------|------------------------------------------------------------|----------------------------------|
| | | , |
| "MGR" = Manager MGR | Alaiandra Daistal | 100 m |
| MOR | Alejandro Bristol 3150 SW 137 Terr | |
| | Davie, FL 33330 | |
| | Davic, PL 33330 | |
| AMBR | Parinaz Bristol | |
| AWDK | 3150 SW 137 Terr | |
| | | - 222 F |
| | Davie, FL 33330 | <u> </u> |
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| (Use attachment if necessary) | | |
| (Osc attachment if necessary) | | |
| CLEV. Effective data if other than the | oto of film | (OPTIONAL) |
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| | specific and cannot be more than five busine | ess days prior to or 90 days |
| te of filing.) | | |
| If the date inserted in this block does no | ot meet the applicable statutory filing requirem | nents, this date will not be lis |
| cument's effective date on the Departme | ent of State's records. | |
| CI E VI. Other provisions if are- | | |
| CLE VI: Other provisions, if any. | | |
| | | |
| | | |
| | | |

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

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

Alejandro Bristol, Manager

Typed or printed name of signee

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)