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(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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06/24/16--01015--022 **125.00



COVER LETTER

TO:	Registration Section Division of Corporations
SUBJE	36781 Aviation LLC.
SUBJE	Name of Limited Liability Company
The end	closed Articles of Organization and fee(s) are submitted for filing.
Please 1	return all correspondence concerning this matter to the following:
	Donald E. Myers
	Name of Person
	Firm/Company
	433 Countryside Drive
	Address
	Naples, Florida 34104
	City/State and Zip Code deercreek_don@yahoo.com
	E-mail address: (to be used for future annual report notification)
For furth	er information concerning this matter, please call;
	Donald E. Myers 765 427 - 4820 at (
	Name of Person Area Code Daytime Telephone Number
	ed is a check for the following amount: D Filing Fee \$\bigs_{\text{Certificate of Status}} \bigs_{\text{S155.00 Filing Fee & Certificate of Status & Certified Copy} \bigs_{\text{Certified Copy}} \bigs_{Certifi
	Mailing Address Street Address

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 New Filing Section
Division of Corporations
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 Liability	Company is:		
36781 Aviation LLC.			
(Must end w	ith the words "Limited	Liability Company,	"L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street ad-	dress of the principal o	ffice of the Limited I	Liability Company is:
Principa	Office Address:		Mailing Address:
433 Countryside Drive	, Naples FL34101	433 C	ountryside Drive
ARTICLE III - Registered Ages (The Limited Liability Company of another business entity with an act The name and the Florida street a	cannot serve as its own tive Florida registratio	Registered Agent. Y n.)	t 's Signature: ou must designate an individual or
	Donald E. Myers	·	
		Name	
	433 Countryside Driv	/e	· · · · · · · · · · · · · · · · · · ·
	Florida street address	s (P.O. Box NOT ac	ceptable)
	Naples	Florida	34104
	City	State	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 Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

16 JUN 24 PH 1: 57

"AMBR" = Authorized Member "MGR" = Manager AMBR Donald E. Myers 433 Countryside Drive Naples, Florida 34104	
AMBR Donald E. Myers 433 Countryside Drive	
AMBR Donald E. Myers 433 Countryside Drive	
433 Countryside Drive	
	
	
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Lica attachment if negacioni)	
CV: Effective date, if other than the date of filing: ctive date is listed, the date must be specific and cannot be more than five bus filing.)	usiness days prior to or 90
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