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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Wallace Saunders

ATTORNEYS AT LAW

October 9, 2017

James G. Butler, Jr.
913.752.5540
jbutler@wallacesaunders.com

Florida Department of State
New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Urban Air Tallahassee, LLC
Our File No: 24976

Dear Sir/Madam:

Enclosed please find the original and one (1) copy of Articles of Organization for Florida Limited Liability Company for the above-named limited liability company. Please file the Articles of record with your office. Also enclosed is our firm check in the amount of \$160.00 to cover the filing, certified copy, and the Certificate of Status fees. I would ask that you please return the filed-stamped copy of the Articles and the requested certified copy and Certificate of Status to the undersigned in the enclosed self-addressed, stamped envelope.

Should you have any questions, please do not hesitate to contact the undersigned.

Very Truly Yours,



James G. Butler, Jr.
For the Firm

JGB/wd
Enclosures

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

URBAN AIR TALLAHASSEE, LLC

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

41 Players Club Villas
Ponte Vedra Beach, FL 32082

ARTICLE III - Registered Agent, Registered Office, and Registered Agent's 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 and the Florida street address of the registered agent are:

Don Marchi

41 Players Club Villas

Ponte Vedra Beach, Florida 32082

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)

ARTICLE IV –

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

Don Marchi

41 Players Club Villas
Ponte Vedra Beach, FL 32082

Peter Gencarelli

233 Water's Edge Drive South
Ponte Vedra Beach, FL 32082

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ARTICLE V: Effective date, if other than the date of filing: _____

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



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.

Peter Gencarelli
Typed or printed name of signee