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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : 'AGENTS AND CORPORATIONS, INC

Account Number : 120010000112 Phone : (302)575-0875 Fax Number : (302)575-1642

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

FLORIDA LIMITED LIABILITY CO. AEROSPACE WORLDWIDE ASSETS LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

SECRETARY OF STATE

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

AEROSPACE WORLDWIDE ASSETS LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "I.L.C.")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

8270 WOODLAND CENTER BLVD. TAMPA, FL 33614

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ARTICLE III - Registered Agent, Registered Office, & 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:

AGENTS AND CORPORATIONS, INC.

300 FIFTH AVENUE SOUTH SUITE 101-330

Florida street address (P.O. Box NOT acceptable)

NAPLES

FL

34012

City

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..

Agents and Corporations, Inc.

Registered Agent's Signature (Required)

John L. Williams, President

(CONTINUED)

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ARTICLE IV- The name and address	of each person authorized to	manage and control the Lir	mited Liability Company:	
Titlo: "AMBR" = Authorized "MGR" = Manager		Name and Address:		
AMBR		RLDWIDE ASSETS LLC D CENTER BLVD. 4	(A Delaware Company)	
	-			
	_			
to the same of the				
(Use attachment if nec	essary)			
ARTICLE V: Effective date, if of (if an effective date is listed, the date of filling.)		nd cannot be more than fiv	. (OPTIONAL) ve business days prior to or 90 da	ys efter
ARTICLE VI: Other provisions,	runy.			
REQUIRED SIGNAT	URE Elli Gar			
(In accordan constitutes a I am aware t	Signature of a member or a ce with section 605.0203 (1) a affirmation under the penal that any false information subthird degree felony as provided	(b), Florida Statutes, the ex lites of perjury that the faces smitted in a document to the ded for in 9:817.155, F.S.)	tecution of this document stated herein are true.	

ichard Wilson
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)