

L18000063846

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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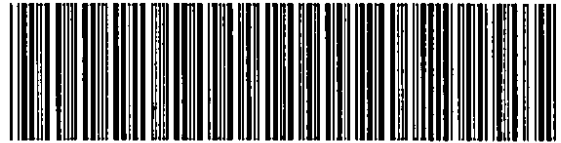
(Business Entity Name)

(Document Number)

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18 MAR 12 AM 9:15
CLERK OF COURT
STATE OF NEW YORK

N CULLIGAN

MAR 2 2018

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: AVIATION & SERVICE
(Name of Resulting Florida Limited Company)

The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.

Please return all correspondence concerning this matter to:

DARREN G. GONZALEZ

(Contact Person)

AVIATION & SERVICES

(Firm/Company)

6419 CLAIR SHORE DR.

(Address)

APOLLO BEACH, FLORIDA 33572

(City, State and Zip Code)

gonzalezdareng@gmail.com

E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

DARREN G. GONZALEZ at (239) 464 4606

(Name of Contact Person)

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)

☒ \$150.00 Filing Fees
(\$25 for Conversion
& \$125 for Articles
of Organization)

☐ \$155.00 Filing Fees
and Certificate of
Status

☐ \$180.00 Filing Fees
and Certified Copy

☒ \$185.00 Filing Fees,
Certified Copy, and
Certificate of Status

STREET ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 2, 2018

DARREN G. GONZALEZ
6419 CLAIR SHORE DRIVE
APOLLO BEACH, FL 33572

SUBJECT: AVIATION & SERVICES
Ref. Number: W18000020546

RECEIVED
2018 MAR 12 PM 3:12
DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICES

We have received your document for AVIATION & SERVICES and your check(s) totaling \$185.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. ✓
One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet ✓
through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words ✓
"Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC".
The following suffixes are no longer acceptable: "Limited Company," "L.C.,"
"LC.," "Ltd.," and "Co."

A SOLE PROPRIETORSHIP CANNOT CONVERT. You just resend the Articles ✓
of Organization without the conversion. Make sure you change the Name.

Please return your document, along with a copy of this letter, within 60 days or ✓
your filing will be considered abandoned!

If you have any questions concerning the filing of your document, please call
(850) 245-6052.

Neysa Culligan
Regulatory Specialist II

Letter Number: 318A00004273

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

AVIATION & SERVICES PLUS LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

6419 CLAIR SHORE DR.
APOLLO BEACH, FLORIDA 33572

Mailing Address:

6419 CLAIR SHORE DR.
APOLLO BEACH, FLORIDA 33572

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:

DARREN G. GONZALEZ
Name

6419 CLAIR SHORE DR.
Florida street address (P.O. Box **NOT** acceptable)

APOLLO BEACH FL 33572
City Zip

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JUDICIAL CIRCUIT IN AND FOR
THE SEVENTH JUDICIAL CIRCUIT
IN FLORIDA
TALLAHASSEE, FLORIDA

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.

Darren Gonzalez
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

MGR

Name and Address:

DARREN G. GONZALEZ
6419 CLAIR SHORE DR.
APOLLO BEACH, FL. 33572

AMBR (ASSISTANT MANAGER)

SANDRA L. GONZALEZ
6419 CLAIR SHORE DR.
APOLLO BEACH, FL. 33572

(Use attachment if necessary)

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ARTICLE V: Other provisions, if any.

REQUIRED SIGNATURE:

Darren G. Gonzalez / Sandra L. Gonzalez

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.

DARREN G. GONZALEZ / SANDRA L. GONZALEZ

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)