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### CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

JET AGENCY GLO	BAL, LLC				
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#### **COVER LETTER**

	ew Filing Section vision of Corporations
SUBJECT	JET AGENCY GLOBAL, LLC
SOBJECT	Name of Limited Liability Company
The enclose	ed Articles of Organization and fee(s) are submitted for filing.
Please retur	n all correspondence concerning this matter to the following:
	LAURA RIEBAU
	Name of Person
	THE WATKINS FIRM, APC
	Firm/Company
	9915 MIRA MESA BLVD, SUITE 130
	Address
	SAN DIEGO, CALIFORNIA 92131
I	City/State and Zip Code  LRIEBAU@WATKINSFIRM.COM
_	E-mail address: (to be used for future annual report notification)
or further in	formation concerning this matter, please call:
	LAURA RIEBAU 619 208-6813
-	Name of Person Area Code Daytime Telephone Number
Enclosed is	a check for the following amount:
	<u> </u>
\$125.00 Fil	ing Fee \$\int_\$\$130.00 Filing Fee & \$\int_\$\$ Certificate of Status \$\int_\$\$ (additional copy is enclosed) \$\int_\$\$ Certified Copy (additional copy is enclosed)

Mailing Address

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

Street Address

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

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
JET AGENCY GLOBAL, LLC	
(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")	

#### ARTICLE II - Address:

ARTICLE I - Name:

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

1560 SAWGRASS CORPORATE PARKWAY	1560 SAWGRASS CORPORATE PRWY
SUITE 485	SUITE 485
SUNRISE, FLORIDA 33323	SUNRISE, FLORIDA 33323

Mailing Address:

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:

Principal Office Address:

Your Capital Connecti	ion, Inc.	
***	Name	
417 E. VIRGINIA ST	REET, SUITE !	
Florida street address	(P.O. Box NOT ac	cceptable)
TALLAHASSEE	FL	32301
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)

Seth Neeley signing on behalf of registered agent Your Capital Connection, Inc.

(CONTINUED)

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## ARTICLE IVThe name and address of each person authorized to manage and control the Limited Liability Company:

<u> </u>	ORDAN BROWN 1560 SAWGRASS CORPORATE PRKWY, #485
<u></u>	
	SUNRISE, FLORIDA 33323
_	
_	
(Use attachment if necessary)	
E V: Effective date, if other than the date of filing:	
E VI: Other provisions, if any.	
REOUIRED SIGNATURE:	2m/
This document is executed in accord I am aware that any false information	authorized representative of a member.  dance with section 605.0203 (1) (b), Florida Statutes.  In submitted in a document to the Department of State revided for in a \$17,155. F.S.
This document is executed in accord I am aware that any false information constitutes a third degree felony as pr	dance with section 605.0203 (1) (b), Florida Statutes.  1 submitted in a document to the Department of State
This document is executed in accord I am aware that any false information constitutes a third degree felony as preferred.  CHRIS POPOV	dance with section 605.0203 (1) (b), Florida Statutes.  1 submitted in a document to the Department of State
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This document is executed in accord I am aware that any false information constitutes a third degree felony as pr  CHRIS POPOV  Typed or p  Filin \$125.00 Filing Fee for Articles of Organization a \$ 30.00 Certified Copy (Optional)	dance with section 605.0203 (1) (b), Florida Statutes. In submitted in a document to the Department of State rovided for in s.817.155, F.S.  printed name of signee  INTERES:  I
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This document is executed in accord I am aware that any false information constitutes a third degree felony as pr  CHRIS POPOV  Typed or p  Filin \$125.00 Filing Fee for Articles of Organization a \$ 30.00 Certified Copy (Optional)	dance with section 605.0203 (1) (b), Florida Statutes. In submitted in a document to the Department of State rovided for in s.817.155, F.S.  printed name of signee  INTERES:  I