L22060367910

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	_	

Office Use Only



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D. O'KEEFE AUG 2 3 2022

. COVER LETTER

Division of Corp				
SUBJECT: FL AVIATION	ON OPERATIONS LLC	C		
30bJEC1.	ON OPERATIONS LLC	ulting Florida Limit	ed Con	pany)
				d fees are submitted to convert an "Other cordance with s. 605.1045, F.S.
Please return all corresp	ondence concerning	g this matter to:		
Rachel Drude Tomori, Es	q.			
	(Contact Person)			
Berlin Patten Ebling, PLL	С			
	(Firm/Company)			
525 1st Avenue North				
	(Address)			
St. Petersburg, Florida 33	3701			
	v. State and Zip Code)			
rdrude@nerlinpatten.com	I			
E-mail Address: (to be u	sed for future annual rep	port notifications)		
For further information	concerning this mat	ter, please cail:		
Alejandro Mont		at (⁹⁴¹	954-9	991 time Telephone Number)
(Name of Contact	Person)	(Area Code)	(Day	time Telephone Number)
Enclosed is a check for dollars and drawn on a			rocess	ed by this office must be payable in US
(\$25 for Conversion a	■\$155 on Filing Fees and Certificate of datus			\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Address New Filing Sect Division of Con P.O. Box 6327 Tallahassee, FL	ion porations		New F Divisi The C 2415 i	Address: Filing Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

The Articles of Conversion and attached Articles of Organization are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida Statutes.

	The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: AVIATION OPERATIONS LLC
	(Enter Name of Other Business Entity)
2.	The "Other Business Entity" is a Limited Liability Company (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
	(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
Fir	rst organized, formed or incorporated under the laws of
	(Enter state, or if a non-O.S. entity, the name of the country)
OD	May 4, 2021
· 11	(date of organization, formation or incorporation)
3.	The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
FL	AVIATION OPERATIONS LLC
_	(Enter Name of Florida Limited Liability Company)
4	If not effective on the date of filing, enter the effective date:
(T the <u>No</u>	he effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after e date this document is filed by the Florida Department of State.) te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nument's effective date on the Department of State's records.
5.	The plan of conversion has been approved in accordance with all applicable statutes.
6.	The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to

which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

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(inesign Docur	ment וט:	UEBS886A-	4EU8-4DU3-9	979-02	301943	U/1A					
Signed this	22	day of	June	20	22						
Signature o	f Autho	rized Repres	entative of Lin	ited Li	ability (Compan	<u> V:</u>				
Signature of Printed Nam	`Authori e:Evan N	zed Represen I. Berlin	tative:	Title	 : Manag	er					
Signature(s	on beha	ulf of Other B	usiness Entity:	[See be	low for	required	d signatur	e(s)]			
Signature: 4 Printed Nam	e: Evan N	I. Berlin		Title	: Manag	er					
Signature: Printed Nam	e:			Title	:	÷					
Signature: Printed Nam	e:		-	Title	:						
Signature: Printed Nam	e:			Title	:			-			
Signature: Printed Nam	e:		-	Title	:			-			
Signature: Printed Nam		-		Title		.					
If Florida C Signature of If Directors	Chairma	n, Vice Chairr	nan, Director, or en selected, an Ir	Officer.	tor must	sign.					
If Florida G Signature of	eneral P	artnership or eral Partner.	Limited Liabil	ity Part	ners <u>hip</u>	:					
If Florida L Signatures o	imited P f <u>ALL</u> G	artnership or eneral Partners	Limited Liabil	ity Limi	ted Par	tnership	<u>:</u>				
All others: Signature of	an authoi	rized person.									
Fees:									VI IV VI I	JU22 J	
		onversion: da Articles of	Organization:	\$25.0 \$125.					ALLAHASSE	2022 JUL 17	<u> </u>

\$30.00 (Optional)

\$5.00 (Optional)

Certified Copy:

Certificate of Status:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company i	s:		
FL AVIATION OPERATIONS LLC (Must contain the words "Limited Liabi	lity Company, "L.L.C.," or "LL.C.")		
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited L	iability Compa	any is:
Principal Office Address:	Mailing Address:		
3700 South Tamiami Trail, Suite 200 Sarasota, Florida 34239	3700 South Tamiami Trail, Suit Sarasota, Florida 34239	e 200	
· · · ·			
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registeres entity with an active Florida registration.)	ed Office, & Registered Agent' istered Agent. You must designate an indiv	s Signature: idual or another	
The name and the Florida street address of the	registered agent are:		
EVAN N. BERLIN			
Nan	ne		
3700 South Tamiami Trail, S Florida street address (P.	Suite 200 O. Box <u>NOT</u> acceptable)		
Sarasota	FL 34239		
City	Zip		
Having been named as registered agent and liability company at the place designated registered agent and agree to act in this capa statutes relating to the proper and complete accept the obligations of my position as re	in this certificate, I hereby accept acity. I further agree to comply we performance of my duties, and I egistered agent as provided for in	the appointment the provision of the pro	ent as ons of alt ith and F.S.
(CONTI	NUED)	حي تب	7099 IIII 17 PM

ARTICLE IV-

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

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager Manager	AMANDAIR, LLC, a Florida LLC Evan N. Berlin 3700 S. Tamiami Trail, STE 200. Sarasota, FL
Manager	CHAMPS & AIR, LLC, a Florida LLC Jamie A. Ebling 3700 S. Tamiami Trail, STE 200, Sarasota, FL
Manager	CJI AVIATION HOLDINGS LLC, a WY LLC Cameron Johnson 1309 Coffeen Ave, STE 1200, Sheridan, WY

(Use attachment if necessary)

ARTICLE V: 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.

Evan N. Berlin

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)

STATE OF WYOMING Office of the Secretary of State

I, EDWARD A. BUCHANAN, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office.

FL AVIATION OPERATIONS LLC

is a Limited Liability Company

formed or qualified under the laws of Wyoming did on **May 4, 2021**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2021-001002046**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 4th day of May, 2021 at 8:58 AM. This certificate is assigned ID Number 044267431.

Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website https://wyobiz.wyo.gov and following the instructions displayed under Validate Certificate.