

# L22000533301

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H22000430879 3)))



H220004308793ABC2

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To: Division of Corporations  
Fax Number : (850)617-6381

From: Account Name : LAZARUS CORPORATE FILING SERVICE, INC.  
Account Number : I20000000019  
Phone : (305)552-5973  
Fax Number : (305)675-5944

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

Email Address: \_\_\_\_\_

FILED  
 12/23/2021 AM 8:02  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

20221223 PM 4:31  
 12202

**FLORIDA LIMITED LIABILITY CO.  
AEROSPACE ENGINE SERVICES LLC**

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

[Electronic Filing Menu](#)

[Corporate Filing Menu](#)

[Help](#)

T. BURCH  
DEC 27 2021

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

EFFECTIVE DATE 1/1/2023

**ARTICLE I - Name:**

The name of the Limited Liability Company is: *(Must end with the words "Limited Liability Company," "LLC," or "LLC.")*

Aerospace Engine Services LLC

**ARTICLE II - Address:**

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

11224 SW 63 TER Miami FL 33173

**ARTICLE III - Registered Agent, Registered Office:**

The name and the Florida street address of the registered agent are: *(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.)*

Osvaldo De Leon Jr.

11224 SW 63 TER Miami FL 33173

**ARTICLE IV -**

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

Daniel Martinez AMBR

Osvaldo De Leon Jr. AMBR

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2022 DEC 22 AM 8:02

FILED

**Required Signatures:**

  
\_\_\_\_\_  
**Signature of a member or an authorized representative of a member.**

In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.

\_\_\_\_\_  
**Osvaldo De Leon Jr**  
**Typed or printed name of signee**

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)**

FILED  
DEC 22 AM 8:02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA