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NIT CHI KITU



CAPITAL CONNECTION, INC.

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

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C&A Aviation Holdings, LLC	- ₁
Please Debit I20000000257 For: 125	
Thank you Seth Neeley	
14/	
Hely	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
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	RA Resignation
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COVER LETTER

TO:	New Filing Sec Division of Cor					
SUBJEC	C&A Aviat	tion Holdings, LLC	2			
		Nam	e of Limit	ed Liabili	y Company	
The encl	osed Articles of	Organization and f	ce(s) are s	ubmitted	for filing.	
Please re	eturn all correspo	ondence concerning	ς this matte	er to the fo	ollowing:	
	Charles T. D	ouglas, Jr.				
				Name of	Person	· · · · · · · · · · · · · · · · · · ·
	Douglas Law	/ Firm				
				Firm/Cor	npany	
	1060 Oakval	c Road				
		 		Addre	ss	
	St. Johns, FL	. 32259				
			City	//State and	Zip Code	
		ie@hotmail.com				
	Ŀ	E-mail address: (to	be used fo	or future a	mual report notificati	on)
For furthe	r information co	ncerning this matte	r, please c	all:		
	Charles T. Do	ouglas, Jr.	904 at (673-2118	
	Nam	e of Person			Daytime Telephone	e Number
Enclosed	1 is a check for th	ne following amou	at:			
≡\$ 125.	00 Filing Fee	□\$130.00 Filing Certificate of St	atus	Certifie	.00 Filing Fee & d Copy I copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailin	g Address		9	Street Address	
		iling Section		Ì	New Filing Section Di	
		on of Corporations ox 6327			The Centre of Tallaha 2415 N. Monroe Stree	
		assee, FL 32314			Fallahassee FL 3230	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liab	bility Company is:				
C&A Aviation Ho					
(Must c	ontain the words "Limited	Liability Company,	"L.L.C.," or "LLC.")		
RTICLE II - Address:					
he mailing address and stree	et address of the principal o	ffice of the Limited	Liability Company is:		
<u>Prin</u>	cipal Office Address:		Mailing Address:		
1060 Oakvale Ros		Sam	Same as principal office address		
St. Johns, FL 322:	59				
RTICLE III - Registered A The Limited Liability Compa	any cannot serve as its own	Registered Agent.	nt's Signature: You must designate an individual or		
ARTICLE III - Registered and The Limited Liability Companion of the business entity with a	Agent, Registered Office, any cannot serve as its own an active Florida registration	Registered Agent. 'on.)	nt's Signature: You must designate an individual or		
ARTICLE III - Registered and The Limited Liability Companion of the business entity with a	Agent, Registered Office, any cannot serve as its own an active Florida registration eet address of the registered	Registered Agent. 'on.) I agent are:	nt's Signature: You must designate an individual or		
ARTICLE III - Registered and The Limited Liability Companion of the business entity with a	Agent, Registered Office, any cannot serve as its own an active Florida registration	Registered Agent. 'on.) I agent are:	nt's Signature: You must designate an individual or		
ARTICLE III - Registered .	Agent, Registered Office, any cannot serve as its own an active Florida registration eet address of the registered	Registered Agent. 'on.) I agent are: Jr.	nt's Signature: You must designate an individual or		
ARTICLE III - Registered and The Limited Liability Companion of the business entity with a	Agent, Registered Office, any cannot serve as its own an active Florida registration eet address of the registered Charles T. Douglas,	Registered Agent. 'on.) I agent are: Jr. Name	You must designate an individual or		
ARTICLE III - Registered and The Limited Liability Companion of the business entity with a	Agent, Registered Office, any cannot serve as its own an active Florida registration eet address of the registered Charles T. Douglas, 1060 Oakvale Road	Registered Agent. 'on.) I agent are: Jr. Name	You must designate an individual or		

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)

(CONTINUED)



ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Title: Name and Address: "AMBR" = Authorized Member "MGR" = Manager MGR (50%) Charles T. Douglas. Jr. 1060 Oakvale Road St. Johns, FL 32259 MGR (50%) Andrew L. Skigen 746 Wright Brothers Drive Jacksonville, FL 32225 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: 2/27/2023 (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. ARTICLE VI: Other provisions, if any. Managing Members 50/50 ownership

REQUIRED SIGNATURE:

Signature of a member or an authorized reppesentative 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.

Charles T. Douglas, Jr.

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)