

4/11/23, 11:40 AM

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : ADVOCATE CONSULTING LEGAL GROUP, PLLC
Account Number : 120090000001
Phone : (239)213-0066
Fax Number : (239)213-0698

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

Email Address: jjohnson@jkrads.com**FLORIDA LIMITED LIABILITY CO.****3J Air, LLC**

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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: 3J Air, LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Erin Meyer
Name of Person
Advocate Consulting Legal Group, PLLC
Firm/Company
3555 Kraft Road, STE 240
Address
Naples, FL 34105
City/State and Zip Code
jjohnson@jkrads.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Erin Meyer 239 213-0066
Name of Person at (Area Code) Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee
- ☐ \$130.00 Filing Fee & Certificate of Status
- ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- ☐ \$160.00 Filing Fee, Certificate of Status & 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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:

31 Air, 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:	Mailing Address:
498 South Lake Destiny Drive Suite 100	498 South Lake Destiny Drive Suite 100
Orlando FL 32810	Orlando FL 32810

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:

Jeffrey Johnson		
Name		
498 South Lake Destiny Drive Suite 100		
Florida street address (P.O. Box NOT acceptable)		
Orlando	FL	32810
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.

DocuSigned by
Jeffrey Johnson
ATF5F1529464DD

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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\$ 5.00 Certificate of Status (Optional)