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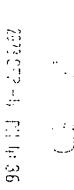
| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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COVER LETTER

| Division of Corporations | | | |
|--|--------------------------------------|---|------------------|
| SUBJECT: PALLAS AVIATION, LLC | | | |
| | Resulting Florida Lim | ited Company) | |
| The enclosed Articles of Conversion, Ar Business Entity" into a "Florida Limited | | | |
| Please return all correspondence concern | ning this matter to: | | |
| JENNIFER H. COPUS, ESQ. | | | |
| (Contact Person) | | _ | |
| COPUS & COPUS, P.A. | | | |
| (Firm/Company) | | _ | |
| 25 WALTER MARTIN ROAD NE, SUITE 20 | 30 | | |
| (Address) | A | _ | |
| FORT WALTON BEACH, FLORIDA 32548 | | | |
| (City. State and Zip Cod | le) | _ | ~3 |
| JENNIFER@COPUSLAW.COM | | | · · · |
| E-mail Address: (to be used for future annua | d report notifications) | _ | 3 |
| For further information concerning this | matter, please call: | | ş!. |
| JENNIFER H. COPUS, ESQ. | at (| 609-1433 | 11 |
| (Name of Contact Person) | | e) (Daytime Telephone Number) | — <u> </u> |
| Enclosed is a check for the following an dollars and drawn on a bank located in the | | processed by this office must | be payable in US |
| □ \$150.00 Filing Fees (\$25 for Conversion and Certificate of & \$125 for Articles Status of Organization) | es S180.00 Filin and Certified Co | | |
| Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallabasses, FL 32314 | | Street Address: New Filing Section Division of Corporations The Centre of Tallahassee | to 810 |
| Tallahassee, FL 32314 | | 2415 N. Monroe Street, Suit | ie 810 |

Tallahassee, FL 32303

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.

| 1. The name of the "Other Business Entity" immediately prior to the filing of the Articles o PALLAS AVIATION, INC. | f Conversion is: |
|--|---------------------------------------|
| (Enter Name of Other Business Entity) | |
| 2. The "Other Business Entity" is a (Enter entity type. Example: corporation, limited partnership, general partnership, common law | |
| (Enter entity type. Example: corporation, limited partnership, general partnership, common lav | v or business trust, etc.) |
| First organized, formed or incorporated under the laws of | |
| (Enter state, or if a non-U.S. entity, the nam | |
| SEPTEMBER 7, 2016 on | |
| On (date of organization, formation or incorporation) | |
| 3. The name of the Florida Limited Liability Company as set forth in the attached Articles | · · · · · · · · · · · · · · · · · · · |
| PALLAS AVIATION, LLC | 2.1 |
| (Enter Name of Florida Limited Liability Company) | (၁ (၅ |
| SEPTEMBER 1, 2024 4. If not effective on the date of filing, enter the effective date: | <u>.</u> |
| (The effective date: Cannot be prior to date of receipt or filed date nor more than 90 cathe date this document is filed by the Florida Department of State.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will | · |
| document'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.

\$25.00

\$125.00

\$30.00 (Optional)

\$5.00 (Optional)

Articles of Conversion:

Certified Copy:

Certificate of Status:

Fees for Florida Articles of Organization:

7387 4 FI 4:36

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: The name of the Limit | ed Liability Company is | \$: | |
|---|---|--|------------------------|
| The mane of the Billion | to Buomy Company w | • | |
| PALLAS AVIATION, LLC | | | |
| (Must co | ntain the words "Limited Liabi | lity Company, "L.L.C.," or "LLC.") | |
| ARTICLE II - Addre | ss: | | |
| The mailing address ar | nd street address of the | principal office of the Limited Liabili | ty Company i |
| <u> Principal Office Addi</u> | ress: | Mailing Address: | |
| 5486 FAIRCHILD ROAD |), HANGAR #7 | POST OFFICE BOX 100 | |
| | | 000000000000000000000000000000000000000 | |
| CRESTVIEW, FLORIDA | 32559 | CRESTVIEW, FLORIDA 32539 | _ |
| CRESTVIEW, FLORIDA | . 32339 | CRESTVIEW, FLORIDA 32539 | |
| | | | |
| ARTICLE III - Regis | tered Agent, Registere | ed Office, & Registered Agent's Sig | or another d |
| ARTICLE III - Regis (The Limited Liability Compa business entity with an active | tered Agent, Registere ny cannot serve as its own Reg Florida registration.) | ed Office, & Registered Agent's Sig istered Agent. You must designate an individual o | nature: (7) or another |
| ARTICLE III - Regis (The Limited Liability Compa- husiness entity with an active The name and the Flor | tered Agent, Registere ny cannot serve as its own Reg Florida registration.) ida street address of the | ed Office, & Registered Agent's Sig istered Agent. You must designate an individual o | or another |
| ARTICLE III - Regis (The Limited Liability Compa- husiness entity with an active | tered Agent, Registere ny cannot serve as its own Reg Florida registration.) ida street address of the PPUS & COPUS, P.A. | ed Office, & Registered Agent's Sig istered Agent. You must designate an individual of registered agent are: | or another |
| ARTICLE III - Regis (The Limited Liability Compa- husiness entity with an active The name and the Flor | tered Agent, Registere ny cannot serve as its own Reg Florida registration.) ida street address of the | ed Office, & Registered Agent's Sig istered Agent. You must designate an individual of registered agent are: | or another |
| ARTICLE III - Regis (The Limited Liability Compa- husiness entity with an active The name and the Flor | tered Agent, Registere ny cannot serve as its own Reg Florida registration.) ida street address of the PPUS & COPUS, P.A. | ed Office, & Registered Agent's Signistered Agent. You must designate an individual of registered agent are: | or another |
| ARTICLE III - Regis (The Limited Liability Compa husiness entity with an active The name and the Flor | tered Agent, Registered by cannot serve as its own Registration.) ida street address of the OPUS & COPUS, P.A. Nar | ed Office, & Registered Agent's Signistered Agent. You must designate an individual of registered agent are: | or another |
| ARTICLE III - Regis (The Limited Liability Compatusiness entity with an active) The name and the Flor CC 25 | tered Agent, Registered by cannot serve as its own Registration.) ida street address of the OPUS & COPUS, P.A. Nar | ed Office, & Registered Agent's Signistered Agent. You must designate an individual of registered agent are: | or another |

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)

ARTICLE IV-

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

| AMBR" = Authorized Member | | |
|--|---|-----|
| MGR" = Manager | | |
| MGR | GULF AIR GROUP, INC. | |
| | POST OFFICE BOX 100 | |
| | CRESTVIEW, FLORIDA 32539 | |
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| E V: Other provisions, if any. | | |
| E V: Other provisions, if any. REQUIRED SIGNATURE: | | |
| E V: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance. | an authorized representative of a member with section 1605.0203 (1) (b). Florida Statutes, I am | awa |
| E V: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a document in a d | an authorized representative of a membe | awa |
| E V: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance. | an authorized representative of a member with section 1605.0203 (1) (b). Florida Statutes, I am | aw |
| E V: Other provisions, if any. EQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a document in a do | an authorized representative of a member with section 1605.0203 (1) (b). Florida Statutes, I am | aw |
| Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S. TIM RHYNE | an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes. I ament to the Department of State constitutes a third de | awa |