

REFERENCE: 740641 153195A

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AUTHORIZATION :

COST LIMIT : S PREPAID

ORDER DATE: November 20, 1995

ORDER TIME : 10:14 AM

ORDER NO. : 740641

CUSTOMER NO:

153195A

CUSTOMER: Shawn Trell, Esq

PURCELL & SCOTT

6053 Memorial Drive

Dublin, OH 43017

5000001651585 12/01/95-00077-0285 \*\*\*\*\*52.50

500001651585 -12/01/95--01077--023 \*\*\*\*250.00 \*\*\*\*250.00

500001651585 -12/01/95--01077--024 \*\*\*\*\*35.00 \*\*\*\*\*35.00

DOMESTIC FILING

NAME: PREMIER AVIATION, L.C.

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XX ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Carol M. Hensal

EXAMINER'S INITIALS:

T. BEOWN NOV 2 8 1995



#### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

November 21, 1995

CSC NETWORKS 1201 HAYS STREET TALLAHASSEE, FL 32301

SUBJECT: PREMIER AVIATION, L.C.

Ref. Number: W95000022936

We have received your document for PREMIER AVIATION, L.C. and your check(s) totaling \$337.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The signature on the Affidavit must be notarized.

Please return the enclosed check for \$337.50 or a newly issued check with your corrected document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6932.

Letter Number: 495A00051333

Teresa Brown Corporate Specialist



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FLORIDA DEPARTMENT OF STATE Sandra B. Mortham
Secretary of State

November 22, 1995

CSC NETWORKS 1201 HAYS STREET TALLAHASSEE, FL 32301

SUBJECT: PREMIER AVIATION, L.C.

Ref. Number: W95000022936

We have received your document for PREMIER AVIATION, L.C. and your check(s) totaling \$337.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

Please return the enclosed check for \$337.50 or a newly issued check with your corrected document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6932.

Teresa Brown Corporate Specialist

Letter Number: 695A00051605

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Premier Aviation, L.C.

#### ARTICLE II - Address:

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

6125 Memorial Drive Dublin, Ohio 43017

#### **ARTICLE III - Duration:**

The period of duration for the Limited Liability Company shall be:

Thirty (30) years

#### ARTICLE IV - Management

	The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:
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The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

Lance K. Poulsen P.O. Box 3764 Port Charlotte, Florida 33952

Barbara Larson P.O. Box 3764 Port Charlotte, Florida 33952

### ARTICLE V - Admission of Additional Members:

The right, if given, of the remaining members to admit additional members and the terms and conditions of the admissions shall be:

By the unanimous written consent of all the members

## ARTICLE VI - Members Rights to Continue Business:

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be:

None

Lance K. Poulsen, Member

## AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member, Lance K. Poulsen, of Premier Aviation, L.C. deposes and says:

- ١. the above named limited liability company has at least two members.
- 2. the total amount of cash contributed by the member(s) is \$500.
- if any, the agreed value of property other than cash contributed by member(s) is \$0. 3.
- the total amount of eash or property anticipated to be contributed by member(s) is \$500. 4. This total includes amounts from 2 and 3 above.

SHAWN A. TREE Lance K. Poulsen, Member NOTARY PURILY STATE OF CHID My Commission Has No Expiration Date Section 147.03 R.C.

## ACCEPTANCE OF REGISTERED AGENT DESIGNATED IN ARTICLES OF INCORPORATION

Corporation Service Company, a Delaware corporation authorized to transact business in this State, having a business office identical with the registered office of the corporation named above, and having been designated as the Registered Agent in the above and foregoing Articles, is familiar with and accepts the obligations of the position of Registered Agent under Section 607.0505, Florida Statutes.

CORPORATION SERVICE COMPANY

ts Agent, Karen B. Ro

1201 Hays Street Tallahassee, FL 32301

CMH/cmh

## FILE NOW: Fee after May 1, will be \$263.75

LIMITED LIABILITY COMPANY FLORIDA DEPARTMENT OF STATE Sandra B. Mortham FILED ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS 96 FEB 15 AM ID: 46 FILING FEE Annual Report \$100.00 + \$138.75 Corporation Supplemental Fee Maxe Check Payable To: FLORIDA DEPARTMENT OF STATE \$ 238.75 SECRETARY OF STATE Name and Mailing Address
 of Limited Liability Company TALLAHASSEE, FLORIDA **DOCUMENT** #L95000000907 1a. Principal Place of Business Address PREMIER AVIATION, L.C. 6125-MEMORIAL DRIVE 6125 MEMORIAL DRIVE DUBLIN- OH-43017 DUBLIN OH 43017 If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2s 2 Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified 3a. State of Formation P.O. Sox #3764 Suite, Apt. W, etc. SAINE Suite, Apt. #, etc. FL 11/20/1995 4. FEI Number Applied For *31-145125*9 City & State City & State Not Applicable Or, CHARLOTTE, FL 5. Date of Last Report 6. Certificate of Status Desired Zin Country 7. Namu and Address of Current Registered Agent 8. Name and Address of New Registered Agent CORPORATION SERVICE , CUMPANY 1201 HAYS STPEET Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE I'L 32301 Suite, Apt. #, etc. 9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. Thereby accept the appointment as registered agent, and accept the obligations. SIGNATURE (Registered Agent Accepting Appointment): (NOTE: Bugistimed Agent signature required when remistaling) 10. Title Managing Members/Managers City. State and Zip Code **Business Street Address** MGRM POULSEN, LANCE K .O. BOX 3764 N/A PORT CHARLOTTE FL MGRM LARSON, BARBARA P.O. BOX 3764 PORT CHARLOTTE FL 11 I do hereby certify that the information supplied with this illing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3) (k). Florida Statutes I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes, and that my name appears in Block 10, or on an attachylent with an address.

BARBARA LARSON

SIGNATURE;