

TRANSMITTAL LETTER  
FOR FLORIDA LIMITED LIABILITY COMPANY

**L96000001061**

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

SUBJECT: SCANDINAVIAN FLIGHT CENTER, L.C.  
(Proposed limited liability company name - must include suffix)

100001965061  
-10/04/96--01046--004  
\*\*\*\*346.25 \*\*\*\*346.25

Enclosed is an original and one (1) copy of the articles of organization and a check for :

EFFECTIVE DATE  
**10-1-96**

☐ \$285.00  
Filing Fee  
& Registered  
Agent designation

☐ \$293.75  
Filing Fee,  
Registered Agent  
Designation &  
Certificate

☐ \$337.50  
Filing Fee,  
Registered Agent  
Designation &  
Certified Copy

☒ \$346.25  
Filing Fee,  
Registered Agent  
Designation,  
Certified Copy &  
Certificate

FROM: JAMES D. MYERS  
Name (Printed or typed)

1995 WEST COMMERCIAL, suite G  
Address

FT. LAUDERDALE, FL 33309  
City, State & Zip

954-776-0543  
Daytime Telephone number

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

96 OCT -4 PM 5:46

**FILED**

NOTE: Please provide the original and one copy of the articles.

**ARTICLES OF ORGANIZATION  
OF  
SCANDINAVIAN FLIGHT CENTER, L.C.**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

56 OCT -4 PM 5:44

FILED

The undersigned member(s) desiring to form a limited liability company under Chapter 608, Florida Statutes, state(s):

**ARTICLE I.**

**NAME:**

The name of this limited liability company shall be SCANDINAVIAN FLIGHT CENTER, L.C.

**ARTICLE II.**

**NATURE OF BUSINESS**

The limited liability company may engage in any activity or business permitted under the laws of the United States and of the State of Florida.

**ARTICLE III.**

**TERM OF EXISTENCE**

The duration of the limited liability company shall commence, effective October 1, 1996 and shall terminate thirty (30) years from the effective date.

**ARTICLE IV.**

**ADDRESS**

The mailing address and street address of the principal office of this Limited Liability Company is 1995 West Commercial Blvd., Suite G, Fort Lauderdale, Florida, 33309.

**ARTICLE V**

**REGISTERED AGENT**

The Registered Agent of this limited liability company shall be James Myers.

EFFECTIVE DATE  
10-1-96

**ARTICLE VI.**

**CASH AND PROPERTY CONTRIBUTED**

The total amount of cash and a description and agreed value of property other than cash contributed is as follows:

Cash in the amount of                      \$1,500.00

**ARTICLE VII.**

**ADDITIONAL CONTRIBUTIONS**

There is no agreement among the members to make additional contributions.

**ARTICLE VIII.**

**ADMISSIONS OF ADDITIONAL MEMBERS**

The members shall have the right to admit additional members upon such terms and conditions as they may determine.

**ARTICLE IX.**

**CONTINUITY OF BUSINESS**

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

**ARTICLE X.**

**MANAGEMENT**

The management of the limited liability company is reserved to the members, whose names and addresses are as follows:

**JAMES MYERS**  
1995 W. Commercial Blvd., Suite G  
Fort Lauderdale, FL 33309

**ARTICLE XI.**

**INDEMNIFICATION**

The limited liability company shall indemnify any member, or former member, and agents of all members, to the fullest extent permitted by law.

IN WITNESS WHEREOF, the undersigned have executed these Articles of Organization on October 1, 1996.

  
JAMES MYERS

STATE OF FLORIDA )

COUNTY OF BROWARD )

SS:

Before me, a notary public authorized to take acknowledgments in the state and county set forth above, personally appeared JAMES M. PERS who has produced Florida Driver's license no. M620-444-53-248-0 (type of identification) as identification who has executed the foregoing Articles of Organization, and he acknowledged before me that he executed those Articles of Organization, and who did not take an oath.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, in the state and county aforesaid, on October 1, 1996.

  
Signature of Notary Public

Joan M. Kuntz  
Typed/Printed Name of Notary

Public

Notary Public, State of Florida  
My Commission Expires:



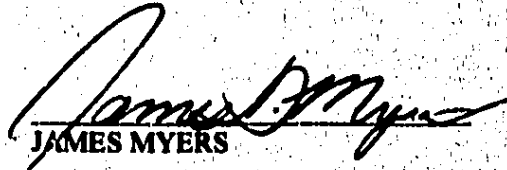
Notary Public, State of Florida  
JOAN M. KUNTZ  
M, Comm. Exp. Oct. 20, 1998  
Lic. No. CC 237261

**AFFIDAVIT**

STATE OF FLORIDA       )  
                                  ) ss:  
COUNTY OF BROWARD    )

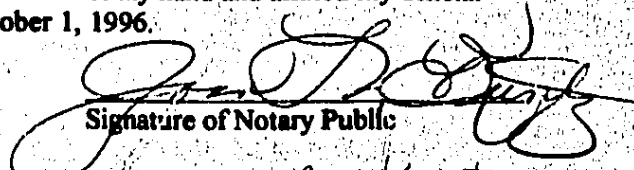
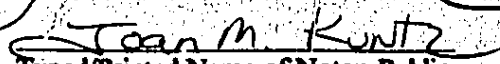
**PERSONALLY APPEARED** before me, the undersigned authority, **JAMES MYERS**, who being duly sworn deposes and says:

1.     My name is **JAMES MYERS**
2.     I have signed the Articles of Organization of **SCANDINAVIAN FLIGHT CENTER, L.C. (Company)**.
3.     The Company consists of two members.
4.     The members have contributed the sum of \$1,500.00 to the Company.
5.     Further Affiant sayeth not.

  
**JAMES MYERS**

The foregoing instrument was acknowledged before me, a notary public authorized to take acknowledgments in the state and county set forth above, by **JAMES MYERS** who has produced Florida Driver's License no. M620-444-53-248-0 (type of identification) as identification who has taken an oath.

**IN WITNESS WHEREOF**, I have hereunto set my hand and affixed my official seal, in the state and county aforesaid, on October 1, 1996.

  
Signature of Notary Public  
  
Typed/Printed Name of Notary Public

**Notary Public, State of Florida**  
**My Commission Expires:**



Notary Public, State of Florida  
**JOAN M. KUNTZ**  
My Comm. Exp. Oct. 20, 1996  
Comm. No. CC 237261

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

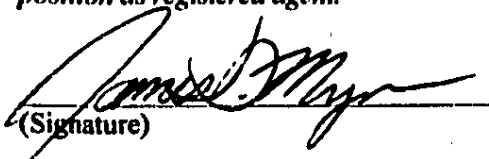
PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is SCANDINAVIAN FLIGHT CENTER, L.C.

2. The name and address of the registered agent and office is:

**JAMES MYERS**  
1995 W. Commercial Blvd. Suite G  
Fort Lauderdale, FL 33309

*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.*

  
(Signature)

10/11/96  
(Date)

**FILED**  
96 OCT -4 PM 5:46  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA