Florida Department of State

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Division of Corporations

Fax Number : (850)410-1015

: CORPORATE CREATIONS INTERNATIONAL INC. Account Name

Account Number : 110432003053 : (305)672-0686 Phone Fax Number **:** (305)672-9110

LIMITED LIABILITY COMPANY

Hemisphere Aviation LLC

Note Effective date is 10/28/98

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Certificate of Status Certified Copy 06 Page Count

\$293.75 Estimated Charge

Corporate Filing

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ARTICLES OF ORGANIZATION

Article I. Name

The name of this Florida limited liability company is:

Hemisphere Aviation LLC

Article II. Duration

The duration of the Company shall be perpetual unless the Company dissolves in accordance with the provisions of the Company's Regulations or these Articles of Organization.

Article III. Address

The mailing address and the street address of the principal office of the Company Beneficial Avenue, Suite 650

Miami FL 33131

Article IV. Registered Agent

The name and address of the registered agent of the Company is: William D. Hoffman 999 Brickell Avenue, Suite 650 Miami FL 33131

Article V. Percentage Interest: Membership Certificate

The profits and losses of the Company shall be allocated to the members in accordance with and in proportion to each member's Percentage Interest (which shall be equal to the number of Units owned by a member divided by the total number of Units owned by all of the members), unless otherwise provided in the Regulations of the Company. A member's interest in the Company may be evidenced by a Membership Certificate issued by the Company.

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Article VI. Dissolution

The Company shall be dissolved upon the death, bankruptcy, dissolution or termination of a member's membership in the Company for any reason, unless the business of the Company is continued by the consent of all the remaining members of the Company within 30 days after any of these events.

Article VII. Transferability of Member's Interest

No member shall have the right to assign the member's interest in the Company without the written agreement of a majority of the Units. If a majority of the Units do not approve the assignment, the assignee shall have no right to become a member, to participate in the management of the Company or to exercise any other rights or powers of a member. The assignee shall merely be entitled to receive the share of profits and other distributions and the allocation of income, gain, loss deduction, credit or similar item to which the assignor was entitled, to the extent assigned.

Article VIII. Management

The management of the Company is reserved to the members. The name and address of each member is:

JAMES SPRINKLE c/o Law Offices of Hoffman & Hoffman	P.A. 999 Brickell Avenue, Suite 650 Miami FL 33131	- - - -
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Article IX. Purpose of the Company

The purpose of the Company shall be to engage in any lawful commercial act or activity for which a limited liability company may be formed under the Florida Limited Liability Company Act.

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Article X. Company Existence

The Company's existence shall begin effective as of October 28, 1998.

AUTHORIZED REPRESENTATIVE OF A MEMBER:

WILLIAM GLENN DILL, JR. by L.A. Uriarte as attorney-in-fact

Date: October 29, 1998

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AFFIDAVIT OF CAPITAL CONTRIBUTIONS

LIMITED LIABILITY COMPANY: Hemisphere Aviation LLC

The undersigned deposes and says:

- 1. The above named Company has at least one member.
- 2. The total amount of initial cash contributed by the members is \$10.00.
- 3. The agreed value of property other than cash contributed by the members is zero. (If the members contributed property other than cash, a description of the property is attached.)
- 4. The total amount of cash or property anticipated to be contributed by the members is \$900,000,000 or less.

AUTHORIZED REPRESENTATIVE OF A MEMBER:

WILLIAM GLENN DILL, JR. by L.A. Uriarte as attorney-in-fact

Date: October 29, 1998

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CERTIFICATE OF DESIGNATION REGISTERED AGENT/OFFICE

Hemisphere Aviation LLC

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REGISTERED AGENT/OFFICE:

William D. Hoffman 999 Brickell Avenue, Suite 650 Miami FL 33131

I agree to act as registered agent to accept service of process for the company named above at the place designated in this Certificate. I agree to comply with the provisions of all statutes relating to the proper and complete performance of the registered agent duties. I am familiar with and accept the obligations of the registered agent position.

William D. Hoffman

by L.A. Uriarte as attorney-in-fact

Date: October 29, 1998

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