# Faa000000149

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Na	me)		
(Document Number)				
Certified Copies	_ Certificate:	s of Status		
Special Instructions to	Filing Officer:			

Office Use Only



200383998692

08/21/22--01038--005 \*\*78.75



Y. SCOTT APR 1 0 2022

#### **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: Noble Jets Inc.			
	Name of corporation	- must include suffix	
Dear Sir or Madam:			
The enclosed "Application by Fore "Certificate of Existence," or "Cert above referenced foreign corporations."	tificate of Good Stand	ling" and check are subm	
Please return all correspondence co	oncerning this matter	to the following:	2022 HAR
James Dodrill, Esq.			
	Name of F	erson	72
Law Office of James G. Dodrill II, PA			
	Firm/Comp	bany	
5800 Hamilton Way			<u>ာရှာ</u> မှာ
	Addre	SS	· · · · · · · · · · · · · · · · · · ·
Boça Raton, FL 33496			
	City/State an	d Zip code	
jim@jimdodrill.com			
E-mail a	address: (to be used for	or future annual report no	etification)
For further information concerning	this matter, please ca	ill:	
James Dodrill, Esq.	at ( <u>561</u>	) 862-0529	
Name of Person	Area Code	Daytime Telepho	one Number
STREET/COURIER AD Registration Section Division of Corporations The Centre of Tallahassee		MAILING AD Registration Se Division of Cor P.O. Box 6327	ction porations
2415 N. Monroe Street, Su Tallahassee, FL 32303	iite 810	Tallahassee, FL	. 32314
Enclosed is a check for the following Please make check payable to: FLOR		OF STATE	
☐ \$70.00 Filing Fee ■ \$78.7		\$78.75 Filing Fee & Certified Copy	□ \$87.50 Filing Fee, Certificate of Status & Certified Copy

### APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

١.	Noble Jets Inc.				
	(Enter name of co	rporation; must include "INCORPORATED," "CO	MPANY," "CORPORATION,"		
	"Inc.," "Co.," "Co	rp," "Inc," "Co," or "Corp.")			
	Nob	le Jet Manaquinen ble in Florida, enter alternate corporate name adopte	+ INC.		
	(If name unavaila	ble in Florida, enter alternate corporate name adopti	ed for the purpose of transacting b	ousiness in Florida	)
2	Delaware	3			
2. Delaware 3. (State or country under the law of which it is incorporated) (FEI number, if applicable)		cable)	<del></del>		
,	March 15, 2021				
4.		of incorporation) 5	(Date of duration, if other tha	n perpetual)	_
,	•	•			
6.	<del></del>	(Date first transacted business in Flori	da, if prior to registration)		
		(SEE SECTIONS 607.1501 & 607.1502, F	S., to determine penalty liability)	2027	
7	14950 NW 44 CT	, STE 16, OPA-LOCKA, FL 33054			77
٠.	149501111 44 61	(Principal office str	eet address)	20	*******
					•
		(Current mailing add	ress, if different)		
		, ,	•		
Q	Name and stree	t address of Florida registered agent: (P.O. Box	NOT acceptable)	S 12.	
υ.	Traine and <u>succ</u>	raparess of Frontier regimered agent. (1.0. 80.		m o	
	Name:	JONATHAN L. JACKSON			
Ω.	ffice Address:	14950 NW 44 CT., STE 16			
<b>O</b> .					
		OPA-LOCKA (City)	, Florida <u>33054</u>		
		(City)	(Zip code)		
9.	Registered age	nt's acceptance:			
H	aving been nam	ed as registered agent and to accept service of			
de	signated in this	application, I hereby accept the appointment	is registered agent and agree	to act in this cap	nacity. I
		emply with the provisions of all statutes relative with and accept the obligations of my position		perjormance oj i	ту ишись,
	<b>,</b>		0		
		/ /			
	_	(Registered agent's signatu	ге)	<del></del>	

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

under the law of which it is incorporated.

#### A. DIRECTORS Name: JONATHAN L. JACKSON □ Chairman Name: ☐ Chairman Address: □Vice Chairman Address: 14950 NW 44 CT, STE 16 ☐ Vice Chairman OPA-LOCKA, FL 33054 □ Director ■ Director □ President President ☐ Vice President ☐Vice President ☐ Treasurer ☐ Treasurer ☐ Secretary ☐ Secretary □ Other \_\_\_\_\_\_ □ Other \_\_\_\_\_\_ □Other \_\_\_\_\_\_ □Other \_\_\_\_\_ Name: \_\_\_\_\_\_ Name: \_\_\_\_\_ □ Chairman □ Chairman ☐ Vice Chairman Address: \_\_\_\_\_ □Vice Chairman Address: ☐ Director Director □ President □ President □Vice President \_\_\_\_\_ □ Vice President ☐ Treasurer\_\_\_ Treasurer □ Secretary ☐ Secretary 苦节 □Öth<del>∂</del> □Other \_\_\_\_\_ □Other \_\_\_\_\_\_ Other \_\_\_\_ Name: \_\_\_\_\_ □Chairman ☐ Chairman Name: \_\_\_\_\_ ☐Vice Chairman Address: □Vice Chairman Address: ☐ Director Director □ President President ☐ Vice President \_ ☐ Vice President ☐ Secretary □Treasurer ☐ Secretary □ Treasurer □Other \_\_\_\_\_ □Other \_\_\_\_\_ Other \_\_\_\_ □Other \_\_\_\_\_\_ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13	Jonathan L. Jackson		
15	(Timed as printed arms and associate of person cigning application)		

## **Delaware**

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELANARE, DO HEREBY CERTIFY "NOBLE JETS INC." IS DULY INCORPORATED

UNDER THE LAWS OF THE STATE OF DELANARE AND IS IN GOOD STANDING AND

HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE ELEVENTH DAY OF MARCH, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NOBLE JETS INC."

WAS INCORPORATED ON THE FIFTEENTH DAY OF MARCH, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

21 BH 2

Authentication: 202894348

Date: 03-11-22

5508388 8300 SR# 20220976333

You may verify this certificate online at corp.delaware.gov/authver.shtml