# Division of prpor

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H10000215974 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

TO:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone : (850)222-1092

: (850)878-5368

**EXAMINER** 

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Address:		
	Address:	Address:

#### Foreign Limited Liability Company Ameriflight, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

Blectronic Filing Menu Corporate Filing Menu

Help

#### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE POLLOWING IS SUBMITTED TO REGISTER A POREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: AmeriFlight, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.") Nevada 38-3755034 2. (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) May 11, 2005 Perpetual (Duration: Year limited liability company will cease to exist or "perpetual") (Date of Organization) 6. Upon Acceptance of Registration (Date first transacted business in Florida, If prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability) 7, 4700 Empire Avenue Burbank, California 91505 (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows: Gary Richards - Member & Manager, Dave DeRose - Member & Manager, Jeffery Drees - Member & Manager Mark Livingston - Vice President/Secretary/General Counsel/Manager, Agnes Rudolph - Assistant Treasurer & Authorized Representative - Business Address for all is as follows: 4700 Empire Avenue, Burbank, CA 91505 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a fineign language, a translation of the certificate under oath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: \_\_\_\_ of Property by Air Signature of a member or an authorized representative of a member. (in accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.) Agnes Rudolph - Assistant Treasurer & Authorized Representative Typed or printed name of signee

FLOST - 05/05/2009 C T Symun Online

### 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 TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name o	f the Limited Liability Company is:
	Ameriflight, LLC
If unavailable,	the alternate to be used in the state of Florida is:
2. The name a	nd the Florida street address of the registered agent and office are:
	C T Corporation System
	(Name)
	1200 South Pine Island Road
	Florida Street Address (P.O. Box NOT ACCEPTABLE)
	Plantation FL 33324
	City/State/Zip
liability comparagent and agree relating to the p obligations of n	amed as registered agent and to accept service of process for the above stated limited by at the place designated in this certificate, I hereby accept the appointment as registered to act in this capacity. I further agree to comply with the provisions of all statutes proper aid complete performance of my duties, and I am familiar with and accept the my position of registered agent as provided for in Chapter 608, Florida Statutes.  Corporated Systems  Chris McNedit  (Signature) ASSISTANT SOCIETARY
	\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

SECRETARY OF STATE



## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

1 further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, AMERIFLIGHT, LLC, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since May 11, 2005, and is in good standing in this state.

Electronic Certificate
Certificate Number: C20100928-2852
You may verify this electronic certificate
online at http://www.nvsos.gov/

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on September 28, 2010.

ROSS MILLER Secretary of State