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DATE:

11/5/13

NAME:

JAHN350AG, LLC

TYPE OF FILING: APPLICATION

COST:

160.00

RETURN:

CERTIFIED COPY AND GOOD STANDING PLEASE

ACCOUNT: FCA00000015

**AUTHORIZATION: ABBIE/PAUL HODGE** 

CR2E927 (9/10)

#### COVER LETTER

TO:

Registration Section Division of Corporations

JAHN350AG, LLC

Name of Limited Liability Company

The enclosed "Application by Poreign Limited Liability Company for Authorization to Transact Business in Florida," Certificute of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Stuart A. Klaskin				
Name of Person				
JAHN350AG, LLC				
Firm/Con-pany				
2601 South Bayshore Drive, Suite 630				
Address				
Miami, FL 33133				
City/State and Zip Code				
saklaskin@jetstreamavcap.com				
E-mail address: (to be used for future annual report notification)				

For further information concerning this matter, please call:

Stuart A. Klaskin

305 447-1920 x 101
Aten Code & Daytime Telephone Number

Name of Person

MAILING ADDRESS:

Division of Corporations Registration Section P.O. Box 6327 Tallahassee, (4, 32314

STREET ADDRESS:

Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Enclosed is a check for the following amount:

[] \$125.00 Filing Fee

□ \$130.00 Filing Fee & Certificate of Status

□ \$155.00 Filing Fee & Certified Copy

DV\$160.00 Filing Fee, Certificate of Status & Certified Copy

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A POREIGN UNITED LIABILITY COMPANY TOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. <u>JA</u>	HN350AG, LLC Name of Foreign Limited Liability Company; must inc				
N/A	Name of Foreign Limited Linbility Company; must inc	lude	S "Limited Liability Company," "L.L.C.," or "L.L.C.")		
	a manalable outer alternate name whented for the our		of transacting business in Florida and attach a copy of	 The written	ı
consent		tern.	nto name. The alternate name must include "Limited Lis		'
ո De	laware .	3	\$0-1022102 (FEI number, if applicable)	$(\gamma_1)$	
	diction under the law of which foreign limited liability any is organized)	٥.	(FEI number, if applicable)	···-(2)	
4. O	ctober 7, 2013	5,	Perpetual		
	(Date of Organization)		(Duration: Year limited liability company will cease exist or "perpetual")	to	
6. N/	Α				
******	(Date first transacted business in t (See sections 608,501 & 608,502 F.	lori S. t	dn, il prior to registration.) o determine penalty liability)	255	28
7. 26	01 South Bayshore Drive, Suite	63	0		W
Mi	ami, FL 33133				7 -5
		\$ ()	Principal Office)		
8. <u>I</u> [Ii	mited liability company is a manager-manage	d o	ompany, check here 🔳	FI SE	Æ 9
9. Tho	name and usual business addresses of the ma	กสยู	ging members or managers are as follows:	馬馬	57
S	tuart A. Klaskin , 2601 South Baysh	101	e Drive, Suite 630, Miami, FL 331	33	
Ko	onrad E. Tree, 2601 South Bayshore Driv	/e,	Suite 630, Miami, FL 33133Aircraft leasi	ng	
	To provide the second s				
the juriso		ору	ays old, duly authenticated by the official Traving custody is not acceptable. If the certificate is in a foreign languag itted.)		in
II. Na	iture of business or purposes to be conducted (	or J	promoted in Florida:		
Air	craft Leasing				
	x hill	)			
			orized representative of a member.		
			ion of this document constitutes an allirmation under the I am mware that any false information submitted in a		
	document to the Department of State constitute	es a	third degree felony as provided for in s.817.155, F.S.)		
	Stuart A. Klackin				

Typed or printed name of signee

### 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 of the Limited Liability Company is:

JAHN350AG, LLC  B'unavailable, the alternate to be used in the state of Florida is:  N/A					
2. The name	and the Florida street add	dress of the registered agent and office are:			
	Stuart A. Kla	skin			
	alt de l'Article de la Very de l'article de	(Name)			
		Bayshore Drive, Suite 630			
	Florida Stru	et Address (P.O. Box NOT accuptable)			
	Miami	<sub>PL</sub> : 33133			
		City/State/Zip			
liability comp registered ago statutes relati	omy ar the place designate out and agree to act in this ing to the proper and comp	and to accept service of process for the above stated limited d in this certificate. I hereby accept the appointment as capacity. I further agree to comply with the provisions of all dote performance of my duties, and I am familiar with and registered agent as provided for in Chapter 608, Florida			

\$ 100.00 Filing Fee for Application Designation of Registered Agent \$ 25.00

\$ 30.00 Certified Copy (optional) 5.00

Certificate of Status (optional)

## Delaware

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## The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "JAHN350AG, LLC" IS DULY FORMED
UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING
AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE
SHOW, AS OF THE FIFTH DAY OF NOVEMBER, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "JAHN350AG, LLC" WAS FORMED ON THE SEVENTH DAY OF OCTOBER, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

5411125 8300

131270408

AUTHENTY CATION: 0868119

DATE: 11-05-13

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