# MIHOOOOOOO

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							
W13-109190							

Office Use Only



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#### FLORIDA DEPARTMENT OF STATE Division of Corporations

December 19, 2013

DONNA M. HAYNES 9147 ODEY DRIVE MECHANICSVILLE, VA 23116

SUBJECT: ALGONQUIN AVIATION, LLC

Ref. Number: W13000069190

We have received your document for ALGONQUIN AVIATION, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date first transacted business in Florida within the meaning of s. 607.150 for 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4) or 608.502(4), F.S., this office is required to collects a civil penalty of \$1,000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report fees due this office.)

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce Regulatory Specialist II

Letter Number: 913A00028812

CR2E027 (9/10)

#### **COVER LETTER**

TO:

Registration Section
Division of Corporations

SUBJECT: \_Algonquin Aviation, LLC

Name of Limited Liability Company

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

Please return all cor	respondence o	oncerning this matt	er to the follo	owing:					
i	Donna	M. Hayn	es						
_			Name o	of Person	• • • • • • • • • • • • • • • • • • • •				
<u>-</u>	Pearl Professional Corporation								
			Firm/Co	ompany					
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<del></del>		E-mail address: (to	be used for f	uture annual r	eport notif	ication)		)30 <b>3</b>	ď.
For further informat	ion concerning	g this matter, please	call:				が 第28 788 788	26 r	Uarga
Don	na M.	Haynes	at	, 804	, 730	-8252	E FLO	PH 3:	
	Name o	of Person	Area Cod	le & Daytime	Telephone	Number	夏萧		ع <sub>م</sub> ي.
	327		STREET A Division of C Registration Clifton Build 2661 Execut Tallahassee,	Corporations Section ling ive Center Circ	cle		481, T	0	
Enclosed is a che		ollowing amoun  \$130.00 Filing  Certificate of S	Fee & 🛚	\$155.00 Filing Certified Cop			Filing Fee, Cert & Certified Co		

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1 Algonquin Aviation, 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.")
2. Delaware 3
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
November 25, 2013 <sub>5.</sub> Perpetual
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6. Upon qualification (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7 301 Yamato Road, Suite 2200
Boca Raton, Florida 33431
(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
Algonquin Acquisition Company, LLC
301 Yamato Road, Suite 2200
Boca Raton, Florida 33431
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 foreign 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: Equipment Leasing
May go Dwine
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. I am aware that any 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.)
Mary DO Devine
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.

The name of the Limited Liability Company is:  Algonquin Aviation, LLC								
If unavailable, the alternate to be used in the state of Florida is:								
2. The name and the Florida street address of the registered agent and office are:								
CT CORPORATION SYSTEM								
(Name)								

1200 SOUTH PINE ISLAND ROAD

Florida Street Address (P.O. Box NOT ACCEPTABLE)

**PLANTATION** 

<sub>a.</sub> 33324

City/State/Zip

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 as provided for in Chapter 608, Florida Statutes.

Assistant Secretary

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(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

# Delaware

PAGE 1

### The First State

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

DELAWARE, DO HEREBY CERTIFY "ALGONQUIN AVIATION, 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 THIRTEENTH DAY OF DECEMBER, A.D. 2013.

5438983 8300

131418640

AUTHENTICATION: 0978290

DATE: 12-13-13

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