M1600000958S

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e,#)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nai	me)
(Do	ocument Number)	
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



800292688388

SECRETARY OF STATE

0EPARTSPRY / E 0 8

DEC -1 AH 9: 36

D. SCOTT DEC 2 2016

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

12/1/16

NAME:

PRESIDIO AIRCRAFT LEASING, LLC

TYPE OF FILING: APPLICATION

COST:

155.00

RETURN: CERTIFIED COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

TO:		ation Section s of Corporation	13						
SUBJE		ESIDIO AIRCR.	AFT LEASING, LLC						
			Name of 1	Limited Liability (Company		•		
			eign Limited Liability Comp d to register the above refere						
Please	return all	correspondence o	concerning this matter to the	following:					
		Karen T. Rodri	guez						
	Name of Person						-		
Triad Professional Services									
Firm/Company						-			
1720 Windward Concourse, S. 390									
Address									
	Alpharetta, GA 30005								
City/State and Zip Code									
		mmillan@lynchi	thompson.com						
	•	· ·	F-mail address: (to be used	for future annual	report not	fication)	•		
For fur	ther infor	mation concernin	g this matter, please call:						
	Karen ?	Γ. Rodriguez		770 at (777-209	91	TALL SECI	16	
	-	Name o	of Contact Person	Area Code	Day	time Telephone Number		黑	77
Enclos	Division Registra P.O. Bo Tallaha	NG ADDRESS: n of Corporations ation Section ox 6327 ssee, FL 32314	s		Division of Registrati Clifton B 2661 Exc	ADDRESS: of Corporations on Section uilding cutive Center Circle ee, FL 32301	ARY OF STATE NSSEE, FLORIDA	-1 M 9 36	LED
		.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	■ \$155,00 Filia Certified Copy	_	□ \$160.00 Filing Fee, C of Status & Certified Co			

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

, PRESIDIO AIRCRAFI	LEASING, LLC	
	ign Limited Liability Company; must include "Limited Liability Company," "L.L.C.,	or "LLC.")
(If name unavailable, enter al Liability Company," "L.L.C,"	ternate name adopted for the purpose of transacting business in Florida. The alternate or "LLC.")	name must include "Limited
2. Illinois	3, 47-2840920	
(Jurisdiction under the law company is organized)	of which foreign limited liability (FEI number, if applica	ble)
4. Upon qualification		
	(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
5. 180 N. Stetson Ave., S	-	
· Chicago, IL 60601		a .
	(Street Address of Principal Office)	≥ 经 6
6. 180 N. Stetson Ave., St	nte 3660	— 58 .
Chicago, IL 60601		
- 0,	(Mailing Address)	
7 Name and street address	s of Florida registered agent: (P.O. Box NOT acceptable)	
7. Idamie mio <u>suect adores</u>	-	mij s
Name:	NRAI Services, Inc.	်င္သည္တို့ 🥨
Office Address:	1200 South Pine Island Road	E 3
	Plantation Florida 33324	Ź
	(City) (Zip code	
designated in this applicate to complywith the provision	gistered agent and to accept service of process for the above stated limited ition, I hereby accept the appointment as registered agent and agree to act it ons of all statutes relative to the proper and complete performance of my diny position as registered agent:	n this capacity. I further agree
	(Registered agent's signature)	
8. The name, title or caps	icity and address of the person(s) who has/have authority to manage is/are:	
	and Member, 180 N. Stetson Ave., Suite 3660, Chicago, IL 60601	
9. Attached is a certificate jurisdiction under the luw of the translator must be so	of existence, no more than 90 days old, duly authenticated by the official have of which it is organized. (If the certificate is in a foreign language, a translation abmitted)	ing custody of records in the on of the certificate under oath
	Signature of an authorized person	
	I in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that the Department of State constitutes a third degree felony as provided for in s	
	VICTORIA RICKS Typed or printed name of signee	
	Typed or printed name of signee	



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

PRESIDIO AIRCRAFT LEASING, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON JANUARY 20, 2015, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE, AND AS OF THIS DATE IS IN GOOD STANDING AS A DOMESTIC LIMITED LIABILITY COMPANY IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set
my hand and cause to be affixed the Great Seat
the State of Illinois, this 30TH
day of NOVEMBER A.D. 2016.

Authentication #: 1633500976 verifiable until 11/30/2017 Authenticate at: http://www.cyberdriveillinois.com Desse White

SECRETARY OF STATE