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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

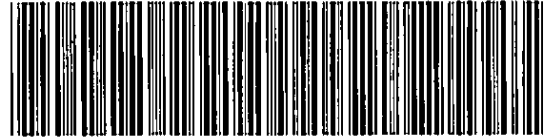
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JAN 10 2022
M. SOLOMON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BCL Aviation Partners, 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 correspondence concerning this matter to the following:

Tracy Luo
Name of Person
Greentree Financial Group Inc.
Firm/Company
7951 SW 6th Street, Suite 216
Address
Plantation, FL 33324
City/State and Zip Code
tracylok@gtfinancial.com
E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

Tracy Luo at (954) 675-5918
Name of Contact Person Area Code Daytime Telephone Number

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: FLORIDA DEPARTMENT OF STATE

- \$125.00 Filing Fee
\$130.00 Filing Fee & Certificate of Status
\$155.00 Filing Fee & Certified Copy
\$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 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. BCL Aviation Partners, 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. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Nevada (Jurisdiction under the law of which foreign limited liability company is organized)
3. 87-2744323 (FEI number, if applicable)

4. 11/9/2021 (Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 7951 SW 6th Street, Suite 216 (Street Address of Principal Office)
6. (Mailing Address)
Plantation, FL 33324

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: R. Chris Cottone

Office Address: 7951 SW 6th Street, Suite 216

Plantation, Florida 33324
(City) (Zip code)

Registered agent's acceptance:

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

R. Chris Cottone (Registered agent's signature)

(Registered agent's signature)

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8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity: Manager **Name and Address:** Name: R. Chris Cottone
 Member Address: 7951 SW 6th St, Ste 216
 Authorized Plantation, FL 33324
 Person _____
 Other _____ Other _____

Manager **Name:** Engineered Transit Services, Inc.
 Member **Address:** 303 Evernia Street, Suite 300
 Authorized West Palm Beach, FL 33401
 Person _____
 Other _____ Other _____

Manager **Name:** _____
 Member **Address:** _____
 Authorized _____
 Person _____
 Other _____ Other _____

Title or Capacity: Manager **Name and Address:** Name: Greentree Financial Group Inc.
 Member Address: 7951 SW 6th St, Ste 216
 Authorized Plantation, FL 33324
 Person _____
 Other _____ Other _____

Manager **Name:** _____
 Member **Address:** _____
 Authorized _____
 Person _____
 Other _____ Other _____

Manager **Name:** _____
 Member **Address:** _____
 Authorized _____
 Person _____
 Other _____ Other _____

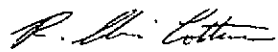
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 ALEX SPENCER

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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.

9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.



Signature of an authorized person

R. Chris Cottone, Manager

Typed or printed name of signer

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, Barbara K. Cegavske, the duly qualified and elected 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, corporations sole, 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.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **BCL Aviation Partners, I.I.C.**, as a **DOMESTIC LIMITED-LIABILITY COMPANY (86)** duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since 09/16/2021, and is in good standing in this state.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on 01/03/2022.

Barbara K. Cegavske

BARBARA K. CEGAVSKE
Secretary of State

Certificate Number: B202201032276370

You may verify this certificate
online at <http://www.nvsos.gov>



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 15, 2021

TRACY LUO
GREENTREE FINANCIAL GROUP INC.
7951 SW 6TH STREET, SUITE 216
PLANTATION, FL 33324

SUBJECT: BCL AVIATION PARTNERS, LLC
Ref. Number: W21000159106

There is a fee of \$72.50 due.

The form you submitted is for a Foreign Profit Corporation, but your entity is a Foreign Limited Liability Company. Please complete and return the enclosed blank form(s).

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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

Mel Solomon
Senior Section Administrator

Letter Number: 521A00030274