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(Re	equestor's Name)			
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## **COVER LETTER**

TO:	Registration S Division of C				
SUB.I	ECT: Boun	ty Air Venture, L	td.		
2020		Florida Limited Partnership		nited Liabilit	ty Limited Partnership)
The e	nclosed Certific	cate of Limited Partner	rship a	nd fees ar	e submitted for filing.
Please	e return all corr	espondence concernin	g this	matter to:	
Yazı	min Gil, Co				_
		(Contact Person)			
Aller	n Morris Co				_
		(Firm/Company)			
121	Alhambra I	Plaza, Ph1, Suite	e 160	00	
<u>-</u>	· <del>··</del>	(Address)			
Cora	al Gables, F	FL. US 33134			
	(1	City, State and Zip Code)			-
For fu	rther informati	on concerning this ma	tter, pl	ease call:	
Yaz	min Gil		at.(	305	, 476-2611
	(Name of Conta	ict Person)			and Daytime Telephone Number)
Enclos	sed is a check f	for the following amou	ınt:		
(\$965 F	00.00 Filing Fees Filing Fee and gistered Agent	\$1,008.75 Filing Fees and Certificate of Status		,052.50 Filir Certified Cop	ng Fees \$\int_\$1,061.25 Filing Fees,  Output  Output
STRE	ET ADDRES	S:		MAIL	ING ADDRESS:
_	stration Section Registration Section				
	on of Corporations Division of Corporations n Building P. O. Box 6327				
	n bunding Executive Cent	er Circle			assee, FL 32314
	assee FL 323				, - <b></b>

CR2E030 (01/06)

## CERTIFICATE OF LIMITED PARTNERSHIP FOR FLORIDA LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

## 1. Bounty Air Venture, Ltd. (FEI 26-0464308)

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)
Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.
Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.

2. 121 Alhambra Plaza, Ph1, Suite 1600				
(Street address of initial designated office)				
Coral Gables, FL 33134				
3. Yazmin Gil				
(Name of Registered Agent for Service of Process)				
4. 121 Alhambra Plaza, Ph1, Suite 1600				
(Florida street address for Registered Agent)				
Coral Gables, FL. US 33134				
5. 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.				
Signature of Registered Agent				
6. 121 Alhambra Plaza, Ph1, Suite 1600				
(Mailing address of initial designated office)				
Coral Gables, FL. US 33134				

7. If limited partnership elects to be a limited liability limited partnership, check box

Name:	Business Address:
Bounty Air, Inc.	121 Alhambra Plaza, Ph1, Suite 160
	Coral Gables, FL. US 33134
	P07-85856
<del>-</del>	
9. Effective date, if other than the date of fill	ng:
(Effective date cannot be prior to nor filed by the Florida Department of St	more than 90 days after the date the document is ate.)
Signed this 24th day of	JULY 2007 .
Signature of each general partner:	
Nationin Gil Tréasurer on behalf et Bounty Al	7 Inc.
	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee) \$52.50

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