

2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M11000004012

Entity Name: RSW FUEL COMPANY LLC**Current Principal Place of Business:**45025 AVIATION DRIVE
SUITE 350
DULLES, VA 20166**Current Mailing Address:**45025 AVIATION DRIVE
SUITE 350
DULLES, VA 20166 US**FEI Number:** 45-3083575**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AUTHORIZED MEMBER
Name JETBLUE AIRWAYS CORPORATION
Address 45025 AVIATION DRIVE
SUITE 350
City-State-Zip: DULLES VA 20166

Title AUTHORIZED MEMBER
Name SPIRIT AIRLINES
Address 45025 AVIATION DRIVE
SUITE 350
City-State-Zip: DULLES VA 20166

Title AUTHORIZED MEMBER
Name DELTA AIR LINES, INC
Address 45025 AVIATION DRIVE
SUITE 350
City-State-Zip: DULLES VA 20166

Title AUTHORIZED MEMBER
Name AMERICAN AIRLINES, INC
Address 45025 AVIATION DRIVE
SUITE 350
City-State-Zip: DULLES VA 20166

Title CONTROLLER
Name DATOC, OLIVIA
Address 45025 AVIATION DR
C/O SWISSPORT FUELING INC. SUITE
350
City-State-Zip: DULLES VA 20166

Title AUTHORIZED MEMBER
Name US AIRWAYS INC
Address 45025 AVIATION DRIVE
SUITE 350
City-State-Zip: DULLES VA 20166

Title AUTHORIZED MEMBER
Name SOUTHWEST AIRLINES CO
Address 45025 AVIATION DRIVE
SUITE 350
City-State-Zip: DULLES VA 20166

Title AUTHORIZED MEMBER
Name UNITED AIRLINES, INC
Address 45025 AVIATION DRIVE
SUITE 350
City-State-Zip: DULLES VA 20166

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: OLIVIA DATOC**CONTROLLER****04/22/2015**

Electronic Signature of Signing Authorized Person(s) Detail

Date