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(Re	questor's Name)	
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(Cit	ry/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Na	me)
(Do	ocument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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Registration Section
Division of Corporations

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

SUBJECT: Jetmas Limited Partnership

Name of Foreign Limited Partnership or Limited Liability Limited Partnership

The enclosed application, certificate of status and fees are submitted to register a foreign limited partnership or limited liability limited partnership to transact business in Florida.

Division of Corporations

Tallahassee, FL 32314

P. O. Box 6327

Please return all correspondence concerning this matter to:

Mark Satterlee, G.F	.			
	Contact Person			
Jetmas L.P.				
	Firm/Company		<u></u>	
1257 Cordova Ave.				
	Address			
Glendale, Ca. 9120)7			
Ci	ty, State and Zip Code			
masatterlee@sbcg	lobal.net			
E-mail address: (to be a	ised for future annual repor	t notification)		
For further information c	oncerning this matter, pleas	se call:		
Mark Satterlee G.P		at (323	₁ 333-	6016
Name of Contac	et Person		de and Dayti	me Telephone Number
Enclosed is a check for th	ne following amount:			
\$1,000.00 Filing Fees (\$965 Filing Fee and \$35 Registered Agent Fee)	\$1,008.75 Filing Fees and Certificate of Status	\$1,052.50 and Certified	Filing Fees Copy	\$1,061.25 Filing Fee, Certified Copy, and Certificate of Status
STREET ADDRESS: Registration Section		MAILING A		



May 31, 2012

MARK SATTERLEE 1257 CORDOVA AVENUE GLENDALE, CA 91207

SUBJECT: JETMAS LIMITED PARTNERSHIP

Ref. Number: W12000029927

We have received your document for JETMAS LIMITED PARTNERSHIP and your check(s) totaling \$1008.75. However, the document has not been filed and is being retained in this office for the following:

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.

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.

Neysa Culligan Regulatory Specialist II

Letter Number: 312A00015639

APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP TO TRANSACT BUSINESS IN FLORIDA

) Jetmas Limite	ed Partnership	•	
Acceptable Limited	Partnership suffixes: Limited Partner.	Hity Limited Partnership, which must includ ship, Limited, L.P., I.P., or Ltd. Limited Liability Limited Partnership, L.L.L.P	
California	•	- ,	
If name unavailable		ership or limited liability limited partnership proids; must contain acceptable suffix.	oposes to register to transact
2.California		_{3.} Feb. 1, 2002	·
	tate or Country of Formation	Date of Formation	
4. Federal Employ	er Ideatification Number: 04-3708	815	ALL ALL
5. Name of Registe	red Agent for Service of Process and	i Florida Street Address:	聖馬田
Nathaniel Zinno)		SSS CE
540 E. Horatio	Ave.# 100		F 9 3
Maitland, Fl. 32	751		OR OR
	ative to the proper and complete perfo	d agree to act in this capacity. I further agree to ormance of my duties, and I am familiar with an	
	Signat	ure of Registered Agent	
7. Principal Office:		8 Mailing Address:	
1257 Cordova Ave. 125		1257 Cordova Ave.	
Glendale, Ca. 91207 Gl		Glendale, Ca. 91207	100 Mary 1 and 1 a
•	ership is a Umited liability limited pa al office address, and mailing addres		
	ıl Partner: Mark Satterlee	Name of General Partner:	
			<u> </u>
Street Address:	1257 Cordova Ave.	Street Address:	
Mailing Addres	8:	Mailing Address:	4
N	1 Paragraph	Name of General Partner:	
Street Address:		Street Address:	
gg ogt 1 v			
Maing Address	S	Mailing Address:	,
		to the state of th	

		Page 1 of 2	
Name of Ger	neral Partner:	Name of General Partner:	
Street Addre	SS:	Street Address:	
Mailing Add	ress:	Mailing Address:	
11. Effective date of	te, if other than the date of filing:	after the date this document is filed by th	
Florida Departme the law of which	ent of State, by the Secretary of State or	ted, not more than 90 days prior to the del other official having custody of the entity	
	gning this document affirm that the fact	gnature of a general partner as stated herein are true and the individual stitutes a third degree felony as provided in	
submitted in a do	Filing Fees: Certified Copy (optional): Certificate of Status (optional):	\$1,000.00 (\$965 Filing Fee and \$3 \$52.50 \$8.75	
		Page 2 of 2	SECR TALLE
	on this	and sworn to (or affirmed) before me day of MAY, 20 12, ALAN SATTEREE.	ETARY OF STA

NAUSHABA AZAM
Commission # 1972592
Notary Public - California
Los Angeles County
My Comm. Expires Apr 15, 2016

Signature _

proved to me on the basis of satisfactory evidence to be the person who appeared before me.

State of California

Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME: JETMAS, A CALIFORNIA LIMITED PARTNERSHIP

FILE NUMBER:

200205600023

FORMATION DATE:

02/21/2002

TYPE:

DOMESTIC LIMITED PARTNERSHIP

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of July 6, 2012.

DEBRA BOWEN Secretary of State