B1900000000004

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
| 2/A51gi- GP's must be agistered with |
| W19-19945 31 |

Office Use Only



900324699769

02/19/19--01012--020 **1000.00

2019 APR 22 PM 3: 29

S. PRAT-



March 26, 2019

AVIATION SOLUTIONS HOLDINGS, L.P. MICHAEL C. SOMMERS 2000 NE JENSEN BEACH BLVD. JENSEN BEACH, FL 34957

SUBJECT: AVIATION SOLUTIONS HOLDINGS, L.P.

Ref. Number: W19000019945

We have received your document for AVIATION SOLUTIONS HOLDINGS, L.P. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

Every corporation, limited partnership, general partnership, limited liability company or trust listed as a general partner of a limited partnership, general partnership, or registered limited liability limited partnership must have an active registration/filing on file with this office before this filing can be completed. We are enclosing the appropriate instructions and/or forms for your convenience.

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.

Stacy Prather Regulatory Specialist III

Letter Number: 919A00006023



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 28, 2019

AVIATION SOLUTIONS HOLDINGS, L.P. MICHAEL C. SOMMERS 2000 NE JENSEN BEACH BLVD. JENSEN BEACH, FL 34957

SUBJECT: AVIATION SOLUTIONS HOLDINGS, L.P.

Ref. Number: W19000019945

We have received your document for AVIATION SOLUTIONS HOLDINGS, L.P. and your check(s) totaling \$1000.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Every corporation, limited partnership, general partnership, limited liability company or trust listed as a general partner of a limited partnership, general partnership, or registered limited liability limited partnership must have an active registration/filing on file with this office before this filing can be completed. We are enclosing the appropriate instructions and/or forms for your convenience.

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.

Michelle Milligan Senior Section Administrator

Letter Number: 119A00004246

RECEIVED

MAR 1 5 2019

COVER LETTER

| Division of Corporations | | |
|---|---|---|
| SUBJECT: Aviation Solutions Holdings, L.P. | | |
| Name of Foreign Limited Partne | ership or Limited I | Liability Limited Partnership |
| The enclosed application, certificate of status and fee partnership to transact business in Florida. Please return all correspondence concerning this mat | | register a foreign limited partnership or limited liability limited |
| Michael C. Sommers | | |
| Contact Person | | - |
| Aviation Solutions Holdings, L.P. | | |
| Firm/Company | | - |
| 2000 NE Jensen Beach Blvd. | | |
| Address | | _ |
| Jensen Beach, FL 34957 | | |
| City, State and Zip Code | | - |
| mike.sommers@stsaviationgroup.com | | |
| E-mail address: (to be used for future annual report | t notification) | _ |
| For further information concerning this matter, please | e call: | |
| Michael C. Sommers | at (| 800-2400 |
| Name of Contact Person | ··· | nd Daytime Telephone Number |
| Enclosed is a check for the following amount: | | |
| \$1,000.00 Filing Fees \$1,008.75 Filing Fees (\$965 Filing Fee and \$35 Registered Agent Fee) \$1,008.75 Filing Fees and Certificate of Status | \$1,052.50 Fill and Certified | ing Fees S1,061.25 Filing Fee, Copy Certified Copy, and Certificate of Status |
| STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 | MAILING ADI Registration Sect Division of Corp P. O. Box 6327 Tallahassee, FL | ion orations |

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

Aviation Solutions Holdings, L.P. (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. If name unavailable, name under which the limited partnership or limited liability limited partnership proposes to register to transact business in Florida; must contain acceptable suffix. 2 Delaware State or Country of Formation Date of Formation 5. Name of Registered Agent for Service of Process and Florida Street Address: Michael C. Sommers 2000 NE Jensen Beach Blvd. Jensen Beach, FL 34957 6. 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. bohal C Sommer Signature of Registered Agent 8. Mailing Address: 7. Principal Office: 2000 NE Jensen Beach Blvd. 2000 NE Jensen Beach Blvd. Jensen Beach, FL 34957 Jensen Beach, FL 34957 9. If limited partnership is a limited liability limited partnership, check box. 10. Name, principal office address, and mailing address of each general partner: Name of General Partner: Aviation Solutions Holdings 6P, Name of General Partner: Name of General Partner: Street Address: 555 Theodore French Ave. Ste. 201 A Street Address: Rye, NY 10580 MIG-3698 Mailing Address: 555 Theodore Frend Ave. Ste. 201 A Mailing Address: Rye, NY 10580 Name of General Partner: ______ Name of General Partner: _____ Street Address: Street Address: ___ Mailing Address: Mailing Address:

| Name of Gene | eral Partner; | Name of General Partner: | Name of General Partner: | |
|--|--|--|--------------------------|--|
| Street Addres | S: | Street Address: | | |
| Mailing Addr | ess: | Mailing Address: | | |
| Note: If the date is document's effect 12. Attached is a Gorida Departme | nserted in this block does not meet the a ive date on the Department of State's re certificate of existence duly authenticate nt of State, by the Secretary of State or o | ofter the date this document is filed by the Florida Department of State. pplicable statutory filing requirements, this date will not be listed as the cords. d, not more than 90 days prior to the delivery of this application to the other official having custody of the entity's records in the jurisdiction upon the content of the conte | e | |
| he law of which i | day of February | 10 | | |
| | ning this document affirms that the fact | s stated herein are true and the individual is aware that false informatio itutes a third degree felony as provided for in s.817.155, F.S. | n | |
| | Filing Fees: Certified Copy (optional): Certificate of Status (optional): | \$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee) \$52.50 \$8.75 | | |

Page 2 of 2

2019 APR 22 PM 3: 29

Page 1



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "AVIATION SOLUTIONS HOLDINGS, L.P." IS

DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE FOURTEENTH DAY OF FEBRUARY, A.D. 2019.

Authentication: 202263304

Date: 02-14-19