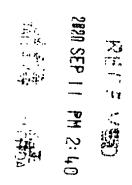
B200000173

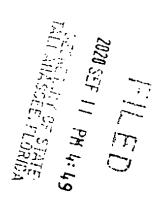
	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-U	P WAIT MAIL
	(Business Entity Name)
	(Document Number)
ertified Copies	Certificates of Status
Special Instruction	ns to Filing Officer:
	Office Use Only



200351848012

09/11/20--01012--014 **1000.00





9/14/20

FLORIDA FILING & SEARCH SERVICES, INC.;

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

a/11/2

NAME:

KIRENAGA AERO LP

TYPE OF FILING: APPLICATION

COST:

1,000.00 - CHECK IS ATTACHED

RETURN:

PLAIN COPY PLEASE

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

L KIRENAGA AERO LP		
Acceptable Limited Partnership suffixes: Limited	ited Liability Limited Partnership, which must inc d Partnership, Limited, L.P., LP, or Ltd. o suffixes: Limited Liability Limited Partnership, L.L.	
	ted partnership or limited liability limited partnerships in Florida; must contain acceptable suffix.	proposes to register to transact
DELAWARE	3, AUGUST 03, 2018	
State or Country of Formatic		 tion
4. Federal Employer Identification Number: N	//A	2028
5. Name of Registered Agent for Service of Pro- TERRANCE BERLAND		DB SEP III
189 S. Orange Avenue, Suite 1400		
Orlando, FL 32801		R C
of all statutes relative to the proper and comp	agent and agree to act in this capacity. I further agr lete performance of my duties, and I am familiar with MCOP BOOM	ree to comply with the provisions
	Signature of Registered Agent	
7. Principal Office:	8. Mailing Address:	
189 S. Orange Avenue, Suite 1400	189 S. Orange Avenue, Suite 1400	
Orlando, FL 32801	Orlando, FL 32801	
9. If limited partnership is a limited liability li 10. Name, principal office address, and mailir	•	
Name of General Partner:	O GP LLC Name of General Partner:	
189 S. Orange Avenue, Sui	ite 1400	
Street Address: Orlando, FL 32801	Street Address:	
Mailing Address:	Mailing Address:	
Name of General Partner:	Name of General Partner:	
Succt Address:	Street Address:	
Mailing Address:	Mailing Address:	

Page 1 of 2

Name of General Partner:	Name of General Partner:			
Street Address:	Street Address:	 		
Mailing Address:	Mailing Address:			
11. Effective date, if other than the date of filing: (Effective date cannot be prior to nor more than 90 days Note: If the date inserted in this block does not meet the document's effective date on the Department of State's r	after the date this document is filed by the applicable statutory filing requirements, the	 Florida Depa his date will no	artment of be list	of State.) red as the
12. Attached is a certificate of existence duly authenticat Florida Department of State, by the Secretary of State or the law of which it is organized.	ted, not more than 90 days prior to the deli	's records in th	he jurisd	
Signed this day of August	,20 20	بع ، ،	2020 SE	
DilSely	ON BELHALF OF KIRENAGA AER	O GP LĽC, GEN	NERAL P	ARTNER
$-\frac{\sqrt{-3}}{s_{il}}$	gnature of a general partner	<u> </u>	<u>-0</u>	177
The individual signing this document affirms that the fac submitted in a document to the Department of State cons	its stated herein are true and the individual	is aware that	false inf	ormation
Filing Fees: Certified Copy (optional): Certificate of Status (optional):	\$1,000.00 (\$965 Filing Fee and \$35 \$52.50 \$8.75	Registered A	gent Fee	2)

Page 2 of 2

<u>Delaware</u>

The First State

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

DELAWARE, DO HEREBY CERTIFY "KIRENAGA AERO LP" 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 THIRTY-FIRST DAY OF AUGUST, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "KIRENAGA AERO

LP" WAS FORMED ON THE THIRD DAY OF AUGUST, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.



Authentication: 203567094

Date: 08-31-20

7003303 8300 SR# 20207026685

You may verify this certificate online at corp.delaware.gov/authver.shtml