

CT Corporation System 660 East Jefferson Street Tallahassee, FL 32301 Tel 850 222 1092 Fax 850 222 7615

Attn: Jeff Netherton

W.P. Verifier

CORPORATION(S) NAM	800 0037061*33 -01/21/0001059 *******8.75 *****		
International Aviation Ma	rketing and Management Services,	00	ACC XC
(x) Profit () Nonprofit	() Amendment	() Merger Py.	TON COKE
(x) Foreign	() Dissolution/Withdrawal () Reinstatement	() Mark	ı
() Limited Partnership () LLC	() Annual Report () Name Registration () Fictitious Name	() Other () Change of RA () UCC	
() Certified Copy	() Photocopies	(x) CUS	
() Call When Ready (x) Walk In () Mail Out	() Call If Problem () Will Wait	() After 4:30 (x) Pick Up	
Name Availability Document Examiner Updater Verifier Acknowledgement	01/21/00	OO JAN 21 DEPARIMENT DIVISION OF COST TALLAHASSEE	TOT

which it is incorporated.

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO

N COMPLIANCI REGISTER A FO	REIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.
TAMETALA	TOWAL AVIATION MARKETING AND MANAGEMENT SERVICES, INC.
	ration; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or rations of like import in language as will clearly indicate that it is a corporation instead of a
words or abbrev natural person o	ration; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or rigidions of like import in language as will clearly indicate that it is a corporation instead of a partnership if not so contained in the name at present.) 10.15 2.3. 36-4181483 2.4. (FEI number, if applicable) 2.5. Perpetual
	26_4101403
	nois 3. 36-4181483 y under the law of which it is incorporated) (FEI number, if applicable)
•	runder the law of which it is messpotated)
4. <u>9-9-9</u>	5. Perpetual te of incorporation) [Duration: Year corp. will cease to existor "perpetual") [Duration: Year corp. will cease to existor "perpetual")
6. <u>11-1-</u> (Date first	t transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
	Northfield Plaza, Suite 525
	hfield, IL 60093
	(Current mailing address)
The trai	nsaction of all businesses which may lawfully be transacted
a 22530x +1	he laws of the States of Illinois and Florida. (s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and str	reet address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
Name:	C T Corporation System
Office Address:	1200 South Pine Island Road
	Plantation , Florida, 33324 (Zip code)
	(Zip code)
10. Registered	agent's acceptance:
	sed as registered agent and to accept service of process for the above stated corporation at the place designated in
this application, I with the provision	i hereby accept the appointment as registered agent and agree to act in this cupacity. I fainted agree to compy As of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept
the obligations of	f my position as registered agent. Francis P. Regan
	(Registered agent's signature) Assistant Secretary
11. Attached is a Department of Sta	certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the ate, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of

^{12.} Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

A. DIREC	TORS (Street address only - P.O. Box NOT acceptable)	
Chairman:	N/A	
Address: _		7.0
_		
Vice Chain	man: N/A	7
Address: _		3 85
_	Philip Coleman	6 g
Address: _	One Northfield Plaza, Suite 525	
_	Northfield, IL 60093	
Director:	Monica A. Carroll	
Address: _	150 N. Michigan Ave., Suite 2500	The second secon
	Chicago, IL 60601	
B. OFFI	CERS (Street address only - P.O. Box NOT acceptable)	
President:	Philip Coleman	<u> </u>
Address:	One Northfield Plaza, Suite 525	
-	Northfield, IL 60093	معند کی _{دید} .
Vice Presid	denr David Coleman	
Address: _	One Northfield Plaza, Suite 525	
	Northfield, IL 60093	· · · · · · · · · · · · · · · · · · ·
Secretary:	Monica A. Carroll	
Address:	150 N. Michigan Ave., Suite 2500	
	Chicago, IL 60601	
Treasurer:	Philip Coleman	
Address:	One Northfield Plaza, Suite 525	
	Northfield, IL 60093	
NOTE:	If necessary, you may attach an addendum to the application listing additional officers and/or directors.	
13	Golfen n	
	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	
14	Philip Coleman, President (Typed or printed name and capacity of person signing application)	
	And the second of the second o	

File Number _______ 5957-916-9



To all to whom these Presents Shall Come, Greeting

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that



In Testimony Whereof, I, hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this ______ A.D. _____ 2000_.

Desse White