# F000000000837

To: Qualification/Tax Lien Section Division of Corporations	2978	<u>-</u> .
SUBJECT: +/ying fish, I	n - must include suffix)	· · · · · · · · · · · · · · · · · · ·
Dear Sir or Madam: $00789-00310-$	_	}
The enclosed "Application by Foreign Corporation for "Certificate of Existence", and check are submitted to to transact business in Florida.	Authorization to Transact Business egister the above referenced foreign	in Florida", n corporation
Please return all correspondence concerning this matter  David B. Lange  (Name of	ノ	·
Flying Fish, In	<b>40000</b> 3 12/16 -	10727842 5/9901065009 \$70.00 ******70.00
P.O. Box 837 (Addi	ess)	e de la companya della companya della companya de la companya della companya dell
Long Key, Fl (City/Sta	3300   te/Zip)	DO FE
Should you need to call someone concerning this matter	r, please call:	FILED B 15 AV
David B. Lange at (305 (Area of	Code & Daytime Telephone Number	FSTATE FLORIDA
STREET ADDRESS:	MAILING ADDRESS:	137
Qualification/Tax Lien Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399	Qualification/Tax Lien Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	0, 0
Enclosed is a check for the following amount:		XX 7/1/2
\$70.00 Filing Fee \$\sigma\$ \$78.75 Filing Fee & Certificate of Status	Certified Copy Certi	0 Filing Fee, ificate of Status & ified Copy



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

December 22, 1999

DAVID B. LANGE P.O. BOX 837 LONG KEY, FL 33001

SUBJECT: FLYING FISH, INC. Ref. Number: W99000029218

We have received your document for FLYING FISH, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

A certificate of existence, 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) 487-6967.

Michelle Hodges Document Specialist

Letter Number: 099A00059986

FILED HIS



#### FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

February 1, 2000

DAVID B. LANGE P.O. BOX 837 LONG KEY, FL 33001

SUBJECT: FLYING FISH, INC. Ref. Number: W99000029218

We have received your document for FLYING FISH, INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

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

A certificate of existence, 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) 487-6917.

Gretchen Harvey Document Specialist Supervisor

Letter Number: 900A00004761

OD FEB 15 AM 9: 57

#### RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

I, the undersigned David B. Lange, do hereby certify
that this Resolution of the Board of Directors of <u>Flying</u> Fish, <u>Inc.</u>
(Corporate Name)
a corporation duly organized and existing under the laws of the State of Delaware,
was duly adopted on
Be it resolved, that <u>flying fish Inc.</u> , (Corporate Name)
organized and existing in the State of, hereby adopts the name
Flying Fish Flight School, Inc. for use in Florida.
Dated: /-20-00
Signature of either Chairman, Vice Chairman or any officer
David B. Lange ORDER 57  Type or print name

### APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.
1. Tying tish Incorporated
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a
natural person or partnership if not so contained in the name at present.)
2. USA Delaware 3. 65-0952208
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 8-25-99 5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. TBA (not as of 12-14-99)
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. P.O. BOX 837
1- 1 1 22-1
Long key, +1 33001
(Current mailing address)
8. to conduct flight instruction
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
0. Name and street address of Florida resistance agents (D.O. Den au M. 2. D D Nom.
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable Find Find Property Company of Find Property Comp
The It was the second
Office Address: 100 N. Layton Dr.
Long Key, Florida, 3300/
(Zip code)
10. Registered agent's acceptance:
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in
inis application, 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.
(Registered agent's signature)
(Registered agent's signature)
11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the
Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.
•

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

A. DIRECTORS (Street address only - P.O.	Box NOT acceptable	e)		
Chairman: David B: Lai	nge	· · · · · · · · · · · · · · · · · · ·		
	// <del></del>			
I am lypy fl	Dr. 33001			t norm
- File page 1				****
Vice Chairman:				
Address:	- Ma	أهدر هدي ٦	<u> </u>	to do more
-				<u> </u>
Director:				
Address:				
Nimonton				
Director:		1	<u> </u>	
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OFFICEDS (Chandrall )				
3. OFFICERS (Street address only - P.C				e e e e e e e e e e e e e e e e e e e
resident: <u>Daviel B. La</u>	mg		<u> </u>	
ddress: 100 N Layton	Dr.	·	. 3/	
Long Key, Fl	-7-7- I	•		
ice President:	·			
				TS B
ddress:		<u>Fire</u> -		Par H
		<u> </u>	<u> </u>	- F - F - S - F - F
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OTE: If necessary, you may attach an addend	ium to the application	listing additional offic		
(5)3			mana da	
(Signature of Chairman, Vice C	Chairman, or any office	er listed in number 12	of the application)	. <u> </u>
	inge /	Owner		
(Pyped or pri	nted name and capacit	y of person signing a	pplication)	

# State of Delaware Office of the Secretary of State

PAGE 1

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FLYING FISH, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE NINTH DAY OF FEBRUARY, A.D. 2000.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES
HAVE NOT BEEN ASSESSED TO DATE.

Edward J. Freel, Secretary of State

**AUTHENTICATION:** 

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ATE: 02-09-00