FOI 0000000 362

To: Registration Section Division of Corporations		
SUBJECT: Aviation DATA Systems (Name of corpor	Tn c ration - must include suffix)	
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation "Certificate of Existence", and check are submitted transact business in Florida.		
Please return all correspondence concerning this ma	atter to the following:	
ANDREW GREEN	800	<u>-01/2</u> 2/0101007007
Aviation Data S	ne of Person) System 3, N C VCompany)	*******70.00 ******70.00
PO Box 634		
<u>Ро Вох 634</u> (/	Address)	·
SANFORD FL 37	771	
	//State/Zip)	
		SE(
Should you need to call someone concerning this m	•	JAN 19 PM
	7) 323-4697)	
(Name of Person) (A	Area Code & Daytime Telephon	ne Numiber) 12: 23
STREET ADDRESS:	MAILING ADDRESS:	inte
Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399	Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	4nch 1/22
Enclosed is a check for the following amount:		
\$\\$\\$70.00 \text{ Filing Fee & Certificate of Status}	☐ \$78.75 Filing Fee & ☐	\$87.50 Filing Fee, Certificate of Status &

Certified Copy

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.	Aviation DATA Systems INC
	(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.	<u> </u>
	(State or country under the law of which it is incorporated) (FEI number, if applicable)
4.	(Date of incorporation) 5. perpetual (Duration: Year corp. will cease to exist or "nerpetual")
	(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6.	
	(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification." (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7.	a 3511 Silverside Rd, Ste 105, Wilmington, DE 19810
	(Principal office address)
	b. PO Box 634 SANFORD, FC, 32771 (Current mailing address)
	(Current mailing address)
8.	Computer Invenued Augition Services ET = T (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
	(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9.	Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
	Name: ANDROW Green
Of	fice Address: 1013 5 Myrthe Ave
	SANFORD, Florida 3277
	(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 this 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)

^{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 business addresses of officers and/or directors:
A. DIRECTORS
Chairman: Andrew Creen
Address: Po Box 634
SANFORD, FL 32771
Vice Chairman:
Address:
District the second sec
Director:
Address:
Director:
Address:
B. OFFICERS President: Aws few Green
T. O
Address: TO Dox 654
SANGORD, FL 32771 景色至卫
Vice President: Same
Address:
DA 23
Secretary: Some
Address:
Treasurer: Same
Address:
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14. ANDROW GROON, PROSIDENT
(Typed or printed name and capacity of person signing application)

State of Delaware Office of the Secretary of State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "AVIATION DATA SYSTEMS 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 SIXTEENTH DAY OF JANUARY, A.D. 2001.

OO JAN 19 PN 12: 23



Harriet Smith Windson

Secretary of State

AUTHENTICATION: 0916234