FOIOGRAMMITOCLETTER O458

	Registration Sec Division of Corp		-	,		
SUBJE	CT: Mari	lin Airways I	[ncorporate	d ·		
	OZ. Mel.	(Name	e of corporation	n - must include suff	fix)	
Dear Sir	or Madam:					
"Certific	osed "Application of Existence of Existence of Existence of Business in Fl	", and check are	orporation for submitted to r	Authorization to Tra egister the above ref	nsact Business in Flori erenced foreign corpor	da", ation
Please re	eturn all correspo	ondence concern	ing this matter	to the following:		
	James	Shollenberge	er		•	
			(Name of	Person)		-
	Merli	n Airways, Ir	nc.	·	600003573	8126——8
	PO Bo	x 81106	(Firm/Co		-01724701 *****87.50	01063002 *****87.50
	Billi	ngs, MT 5910	(Addr 08	ess)		
• • •	<u> </u>		(City/State a	nd Zip code)		-
For furth	er information o	concerning this n	natter, please c	all:	,	
Jar	mes Shollenb	erger	at (406	896-3200		
•	(Name of Person	n)		Code & Daytime Tele	ephone Number	F1
Registrate Division 409 E. G	F ADDRESS: tion Section of Corporations taines St. see, FL 32399			MAILING ADDR Registration Section Division of Corpor P.O. Box 6327 Tallahassee, FL 32	n TA	LED # 11: 28
	l is a check for t	he following amo \$78.75 Filing Certificate of	g Fee & 🖸	\$78.75 Filing Fee & Certified Copy	\$ \$87.50 Filing Certificate of Certified Co	Status &

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.	1. Merlin Airways 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.	Del	aware	3.	91-202179	98						
	(State or countr	y under the law of which it is incorporated)			(FEI number, if applicable)						
4.	2-1	.8–2000	5.	perpetua	ar corp. will cease to exist or "perpetual")						
••		e of incorporation)		(Duration: Yes	ar corp. will cease to exist or "perpetual")						
6.	3-1	3-2000									
(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 Merlin Airways, Inc. 2220 Grant Rd., Billings, MT 59102											
(Principal office address)											
	PO Box 81106, Billings, MT 59108										
	(Current mailing address)										
8.	Aiı	r Carrier		TALLA IN							
	(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:	Katherine J. Placanica	-	·	TSI D						
0	office Address:	14850 NW 44th CT, Hangar 102	, R	m 242	Z8 TE IDA						
V	illoo i idaloos.	Opa Locka		, Florida	33054						
		(City)	2		(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.

Katherine Placanica (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: Address: Vice Chairman: Address: Director: Address: ___ B. OFFICERS President: Michael Overstreet PO Box 81106 AN Address: Billings, MT 59108 Vice President: James Shollenberger PO Box 81106, -Address: ____ Billings, MT 59008 Secretary: /Treasurer: Robert McIver Address: PO Box 81106, Billings, MT 59108 Treasurer: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) James Shollenberger, Vice President

(Typed or printed name and capacity of person signing application)

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 "MERLIN AIRWAYS, 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 TWENTY-SIXTH DAY OF DECEMBER, A.D. 2000.

FILED

OD JAN 24 PM II: 28

SECRETARY OF STATE
TAN AHAS HE FLORIDA

Edward I. Freel, Secretary of State

AUTHENTICATION: 0878550

DATE: 12-26-00

3164237 8300

001621922