F01000000533

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
	riation Services 1 Inc.
(Name	of corporation - must include suffix)
Dear Sir or Madam:	
	rporation for Authorization to Transact Business in Florida", submitted to register the above referenced foreign corporation
Please return all correspondence concerning	ng this matter to the following:
Cindy J. Gornto, Esq.	*******78.00 ******78.00 ******78.00 ***********************************
	(Name of Person)
Louis X. Amato, P.A.	-
	(Firm/Company)
801 Laurel Oak Drive Su	ite 615
	(Address)
Naples, FL 34108	-
	(City/State and Zip code)
For further information concerning this ma	atter, please call:
Cindy J. Gornto, Esq.	at (941) 596-2152
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount	unt: 1/29
\$70.00 Filing Fee \$78.75 Filing Certificate of	

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.	Interna	ational	Aviation	Services	s 1 :	Inc.						
	(Name of corpor words or abbrevi natural person or	iations of like	e import in langt	age as will clea	arly ind	licate that it					-	
2.	Wiscons	in			3.	39-1999	9150		-			
	(State or country under the law of which it is incorporated) (FEI number, if applicable)							_ :				
4.	6/23/2	000 .		<u>. </u>	5	Perpeti	ıal		-	=-	_	
	(Date	of incorpora	ation)	•	(I	Düration: Y	ēar corp. v	ill cease to	exist or "perj	oetual"))	
6.	Corp	oration	has not	yet tran	sact	ed in 1	Florida	a	-			
	(Date first transact	cted business		orporation has CTIONS 607.15					'upon qualifi	cation."	<u>')</u>	
7.	2614	North	Sugar Bus	h Road			-					
			(P)	rincipal office a	address)	· · · · · · · · · · · · · · · · · · ·		-		-	
	New	Franken	, WI 542	29								
			(C	urrent mailing a	address)			Z Z Z	00	-	
8.	Cond	lucting	cargo ope	erations	for	aviati	on com	pany	LAIR	JAN	<u> </u>	
	(Purpose(s	s) of corporat	tion authorized i	n home state or	r count	ry to be carr	ied out in s	tate of Flori	da)	26		<i></i>
9.	Name and str	eet address	of Florida re	gistered agen	nt: (P.	O. Box or	Mail Dro _l	Box NOT	acceptable) <u>=</u>	Ü	
	Name:	Louis	X. Amato	-	r	<u></u> t			TATE OF THE PERSON OF THE PERS	12: 26		
0	ffice Address:	801 La	urel Oak	Drive Su	ite	615	: V	<u>.</u> . =				
		Naples	5			_ . Florida	3410	8				
			(City)			,110110,0	(Zip co	ode)				

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 facept 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. DIREC	CTORS
Chairman:	Juan Masson (Also an Officer)
Address: _	11854 Regional Lane 2nd Floor
_	Ft. Myers, FL 33913
Vice Chairr	nan: James M. Roberts (Also an Officer)
Address: _	P.O. Box 112 2614 Sugar Bush Road
	New FRanken, WI 54229
Director: _	Dale A. Roberts (Also an Officer)
Address: _	P.O. Box 112 2614 N. Sugar Bush Road
_	New Franken, WI 54229
Director: _	
Address: _	
B. OFFI	CERS
President:	Juan Masson (Also a Director)
Address: _	11854 Regional Lane 2nd Floor
	Fort Myers, FL 33913
Vice Presid	ent:James M. Roberts (Also a Director)
Address: _	P.O. Box 112 2614 Sugar Bush Road
_	New Franken, WI 54229
Secretary:	
Address: _	
Address: _	
NOTE: 1	f 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	(Typed or printed name and capacity of person signing application)

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

12.

B. OFFICERS

Chief Executive Officer:

Dale A. Roberts (Also a Director)

Address:

P.O. Box 112 2614 N. Sugar Bush Road

New Franken, WI 54229

(Signature of any officer)

(Typed or printed name and capacity of person signing)

OO JAN 26 MH 12: A

DOM NEW 180 181 185

United States of America

State of Wisconsin



DEPARTMENT OF FINANCIAL INSTITUTIONS

To All to Whom These Presents Shall Come, Greeting:

I, RAY ALLEN, Administrator of the Division of Corporate & Consumer Services of the Department of Financial Institutions, do hereby certify that

INTERNATIONAL AVIATION SERVICES I INC.

is a domestic corporation organized under the laws of this state and that its date of incorporation is JUNE 23, 2000.

I further certify that said corporation has not yet completed its initial report year and, accordingly, has not yet filed an annual report under ss. 180.1622, 180.1921 or 181.1622, Wis. Stats.; and that said corporation has not filed articles of dissolution.

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IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department on January 19, 2001.

RAY ALLEN, Administrator

Division of Corporate & Consumer Services

Department of Financial Institutions

BY: Patricia li

Effective July 1, 1996, the Department of Financial Institutions assumed the functions previously performed by the Corporations Division of the Secretary of State and is the successor custodian of corporate records formerly held by the Secretary of State.