


2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # F01000002953		
1. Entity Name AIR JAMAICA LIMITED, INC.		

FILED
09 MAR 10 PM 4:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 72-76 HARBOUR STREET KINGSTON JAMAICA, W.I., XX	Mailing Address 72-76 HARBOUR STREET KINGSTON JAMAICA, W.I., XX
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2. Principal Place of Business - No P.O. Box # 72-76 Harbour Street Suite, Apt. #, etc.	3. Mailing Address 72-76 Harbour Street Suite, Apt. #, etc.
City & State Kingston	City & State Kingston
Zip Country Jamaica W.I.	Zip Country Jamaica W.I.



0302009 REINSTATEMENT JAMAICA 1/07 08-09

4. FEI Number
98-0013910

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$300.00	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	C WILLIAMS, SHIRLY 72-76 HARBOUR STREET KINGSTON, JAMAICA, W.I., <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P RODGERS, WILLIAM B 72-76 HARBOUR STREET KINGSTON, JAMAICA, W.I., <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	P Bruce R. Nobles 72-76 Harbour Street Kingston, Jamaica W.I. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T WRIGHT, KIRBY 72-76 HARBOUR STREET KINGSTON, JAMAICA, W.I., <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	CFO Howard Hall 72-76 Harbour Street Kingston, Jamaica W.I. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S DUNDAS, MERL 72-76 HARBOUR STREET KINGSTON, JAMAICA, W.I., <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 400145416564 03/10/09--01028--004 **308.75
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:  Merl Dundas, Company Secretary Mar. 2, 2009 876 922 3460

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #