

# F016000065201

## TRANSMITTAL LETTER

To: Registration Section  
Division of Corporations

SUBJECT: AERO SERVICES CORPORATION  
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

700004612657--2  
-09/26/01--01082--002  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

MARK COHEN

(Name of Person)

W01-22501

MCM INTERNATIONAL, INC

(Firm/Company)

1772 EAST TRAFALGAR CIRCLE

(Address)

HOLLYWOOD, FL 33020

(City/State/Zip)

Should you need to call someone concerning this matter, please call:

MARK COHEN

(Name of Person)

at ( 954 ) 922-6042

(Area Code & Daytime Telephone Number)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

01 OCT -4 AM 2:19

FILED

### 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:

- ☒ \$70.00 Filing Fee    ☐ \$78.75 Filing Fee & Certificate of Status    ☐ \$78.75 Filing Fee & Certified Copy    ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

10/4



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

September 28, 2001

MARK COHEN  
1772 EAST TRAFALGAR CIRCLE  
HOLLYWOOD, FL 33020

SUBJECT: AERO SERVICES CORPORATION  
Ref. Number: W01000022501

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

A brief description of the entity's nature of business must be included in the document.

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.

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) 245-6097.

Michael Mays  
Document Specialist

Letter Number: 001A00053908

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# RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

I, the undersigned KEITH J. MACKAY, do hereby certify  
(Name)

that this Resolution of the Board of Directors of AERO SERVICES CORPORATION  
(Corporate Name)

a corporation duly organized and existing under the laws of the State of DELAWARE  
was duly adopted on OCTOBER 01  
(Corporate Name)

Be it resolved, that AERO SERVICES CORPORATION, hereby adopts the  
organized and existing in the State of DELAWARE, 2001.

Dated: 10/01/01

Keith J. Mackay  
Signature of either Chairman, Vice Chairman or any officer

Keith J. Mackay  
Type or print name

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Make checks payable to Florida Department of State and mail to:  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**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. AERO SERVICES CORPORATION  
(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. DELAWARE 3. 65-1129568  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 8/13/91 5. Perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. Upon Qualification  
(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. 6610 SKYLINE DRIVE, DELRAY BEACH, FL 33446  
(Principal office address)
- b. 6610 SKYLINE DRIVE, DELRAY BEACH, FL 33446  
(Current mailing address)
8. MANAGEMENT AND CONSULTING  
(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: KEITH MACKAY
- Office Address: 6610 SKYLINE DRIVE  
DELRAY BEACH,, Florida 33446  
(Zip code)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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.

Keith Mackay  
(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: KEITH MACKEY

Address: 6610 SKYLINE DRIVE  
DELRAY BEACH, FL 33446

Vice Chairman \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

B. OFFICERS

President: KEITH MACKEY

Address: 6610 SKYLINE DRIVE  
DELRAY BEACH, FL 33446

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. [Signature]  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. KEITH MACKEY - PRESIDENT  
(Typed or printed name and capacity of person signing application)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*State of Delaware*  
*Office of the Secretary of State* PAGE 1

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I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "AERO SERVICES CORPORATION" 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 TENTH DAY OF SEPTEMBER, A.D. 2001. . . . .

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



*Harriet Smith Windsor*  
Harriet Smith Windsor, Secretary of State

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AUTHENTICATION: 1336312

DATE: 09-10-01