

FDS000000287

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

(Business Entity Name)

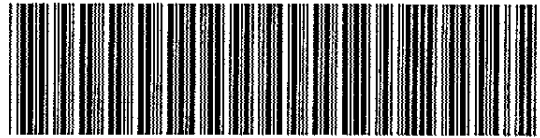
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TALLAHASSEE, FLORIDA

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FDS-287  
OK

**FLY CAP10 Don, Inc.**  
**5000 Culbreath Key Way**  
**#4-102**  
**Tampa, FL 33611**

**Tammi Cline, Document Specialist**  
**Florida Department of State**  
**Division of Corporations**  
**P.O.Box 6327**  
**Tallahassee, FL 32314**

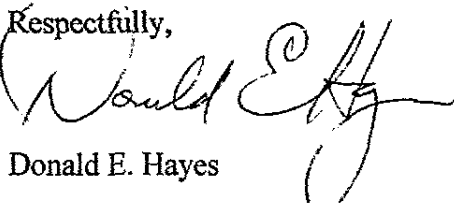
**14 January, 2005**

Dear Ms. Cline,

Thank you for your letter of December 10, 2004. Attached is an original document from Delaware as you requested. I hope this meets the needed requirements.

Should you need any further information please feel free to contact me. Thank you.

Respectfully,



Donald E. Hayes

Attachments: Ref Number W04000045261 Letter Number: 504A00069172  
Delaware auth: 3595958

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TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

December 10, 2004

DONALD HAYES, JR.  
5000 CULBREATH KEY WAY #4-102  
TAMPA, FL 33611

SUBJECT: FLY CAPIO DON, INC.  
Ref. Number: W04000045261

We have received your document for FLY CAPIO DON, INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6020.

Tammi Cline  
Document Specialist

Letter Number: 504A00069172

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TALLAHASSEE, FLORIDA

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## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** FLY CAP10 DON, INC  
(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:

DONALD E. HAYES, JR  
(Name of Person)

FLY CAP10 DON, INC  
(Firm/Company)

5000 CULBREATH KEY WAY #4-102  
(Address)

TAMPA, FL 33611  
(City/State and Zip code)

For further information concerning this matter, please call:

DONALD HAYES at (813) 839-5640  
(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

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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

**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. FLY CAP10 DON, INC  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

FLY CAP10 DON/DAKOTA, INC  
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. DELAWARE 3. #55-0886-758  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 11-05-2004 5. PERPETUAL  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. N/A  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 112 DEER VALLEY LANE, WILMINGTON, DE. 19807  
(Principal office address)

5000 CULBREATH KEY WAY #4-102, TAMPA, FL 33611  
(Current mailing address)

8. HOLDING CORPORATION  
(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 NOT acceptable)

Name: DONALD E. HAYES

Office Address: 5000 CULBREATH KEY WAY #4-102

TAMPA

(City)

, Florida 33611

(Zip code)

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**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.*

Donald E. Hayes  
(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: DONALD E. HAYES

Address: 5000 CULBREATH KEY WAY #4-102  
TAMPA, FL 33611

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

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

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

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

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

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

**B. OFFICERS**

President: DONALD E. HAYES

Address: 5000 CULBREATH KEY WAY #4-102  
TAMPA, FL 33611

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. Donald E. Hayes

(Signature of Director or Officer listed in number 12 of the application)

14. DONALD E. HAYES, PRESIDENT

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

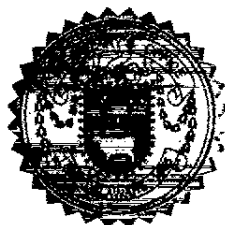
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TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

# Delaware

PAGE 1

*The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FLY CAP10 DON, 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 FOURTH DAY OF JANUARY, A.D. 2005.



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040937935

*Harriet Smith Windsor*

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 3595958

DATE: 01-04-05