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SECRETARISEE FLORIDA

TALLAHASSEE FLORIDA



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

March 2, 2005

JOSEPH D. CLEGHORN CLEGHORN AVIATION INC. 529 UNITED STREET KEY WEST. FL 33040

SUBJECT: CLEGHORN AVIATION INC.

Ref. Number: W05000010844

SECRETARY OF STATE TALLAHASSEE, FLORIDA

We have received your document for CLEGHORN AVIATION 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 note that the printout you submitted is not the same as the certificate we require. Please contact the Delaware Secretary of State to obtain the certificate described above.

Please return 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) 245-6958.

Lee Rivers Document Specialist

Letter Number: 105A00014557

Please for notice at acceptamen to 305-295-0509

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: (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: Toseph D. Clark n (Name of Person)
Clegharn Avlation, Inc (Firm/Company)
Hey West H 33040 (City/State and Zip code)
(City/State and Zip code) For further information concerning this matter, please call:
(Name of Person) at (305) 292-2000 (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 Pivision of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:
□ \$70.00 Filing Fee Certificate of Status □ \$78.75 Filing Fee Certified Copy □ \$87.50 Filing Fee, Certificate of Status Certified Copy □ \$78.75 Filing Fee Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

1. Comparison of Corporation of Transact Business in the State of Florida. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 2. Delaware 3. 41-2694760
2. Delaware (State or country under the law of which it is incorporated) 3. 41-2694760 (FEI number, if applicable)
4. 5-12-63 5. (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6 2-28-05
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 529 united St Key West 72 33040
(Principal office address) 529 United State West The 33040 (Current mailing address)
8. Real Estate Purchases (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: Hathy L ancay
Office Address: 529 United Street
City), Florida 33046 (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 dutie and I am familiar with and accept the obligations of my position as registered agent.
Jaffly James (Jegistered agent's Sknature)

- 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	
Chairman: Address:	701 Waddell Key West 71 33090
_	
Vice Chairn	nan:
Address: _	TASEC C
_	ARE HARE
Director: _	
Address: _	
_	DRA E 24
	P +-
\ddress:	<u>.</u>
Address: _	Joseph D Claghorn 701 Waldell TayWest 71-33040
ice Preside	ent: Joseph D. Cleyhour
\ddress: _	
	Joseph D. Clashur
	necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Director or Officer listed in number 12 of the application)
4	Taseph (Signature of Director or Officer listed in number 12 of the application) (Typed or printed name and capacity of person signing application)

PAGE 1

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CLEGHORN AVIATION 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 EIGHTH DAY OF MARCH, A.D. 2005.

SECRETARY OF STATE



Warriet Smith Hindson

AUTHENTICATION: 3727466

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3657142

DATE: 03-08-05