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## **COVER LETTER**

TO: New Filing Section **Division of Corporations** 

Solu nc. ine tions, SUBJECT:

(Name of corporation - must include suffix)

Dear Sir or Madam:

ş

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:

Lori	J. Wendt	-		
······································	(Nai	ne of Person)		-
Airl	Prime Solution	ns, Inc.		
	(Fire	n/Comnany)		-
10 0	hickester Ro	ad		
t		Address)		_
H~n-	tington Statio	NY II	746 35	_
	(City/S	tate and Zip code)		
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For further informatio	n concerning this matter, ple	ase call:	Set D	
1				
Lori W	$\frac{2 - dt}{\text{son}}$ at (5)	40, 349-8.	phone Number)	C
(Name of Per	son) (A	rea Code & Daytime Teler	shone Number)	
·		r .	À DZ	
STREET/CO	URIER ADDRESS:	MAILING	ADDRESS:	
New Filing Se		New Filing		
Division of Co			Corporations	
Clifton Buildi 2661 Execution	ng e Center Circle	P.O. Box 63 Tellahaana		
Tallahassee, F		Tallahassee,	FL 32314	
·				
Enclosed is a check fo	r the following amount:			
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status Certified Copy	&

## PLICATION 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. Airfrime Solutions Inc. 1. (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) 16-1623064 New Yor 3. 2 (FEI manber, if applicable) (State or country under the law of which it is incorporated) (Duration: Year corp. will couse to exist or "perpetual") (Date of incorporation) Mary 12006 (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) (Principal office addres 86157 White ったっ Current mailing address) 90 Sot Software training instal 8. APR AHASSEE, FLOR (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) Incorporating Services, Ltd. Name: Office Address: 1540 Glenway Drive دي 20 Florida 32301 Tallahassee (City) (Zin code)

10. Registered sgent'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 agant 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.

(Regi) and 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: Lori Wendt		<i>1</i> 2.	
Address:	<u></u>		
Whrrenton, VA 20187			
Vice Chairman: Drane Dubic Ki			
Address: 52 Highland PL			
Glen Cove, NY 11542			
Director: N/A			
Address:			
Director: N/A			· · ·
Address;			
	· · · · · · · · · · · · · · · · · · ·		
B. OFFICERS	SEC	90	
President Lori Wendt	AHA	APR	ĨŢ
Address: 4619 Canter Lane		12	
Warrenton, VA 20187		PH	0
Vice President: Diane D. bicki		0:5 3:0	
Address: 52 Highlad		10	
Glen Cove, NY 11542			
Secretary: Diane Dubicky'			
Address: 52 Highlad, GlenCove, NY 11542			<u> </u>
Treasurer: Lori Wendt			
Address: : 4619 Canter Lane			
			<u> </u>
NOTE: If necessary, you may attach an addendum to the application listing additional officers an	d/or direct	tors.	
13			
(Signature of Director or Officer listed in number 12 of the application)			

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



## State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of AIRPRIME SOLUTIONS, INC. was filed on 08/05/2002, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

> WITNESS my hand and the official seal of the Department of State at the City of Albany, this 16th day of March two thousand and six.



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