# F08000004145

(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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SECRETARY OF STATE

W1848254

#### COVER LETTER

	ing Section of Corporations		
SUBJECT:	Air Compassion Flo	orida, Inc.	
	(Name of Corporate	on – must include suffix)	
Dear Sir or Mad	ım:		
Affairs in Florid	pplication by Foreign Not for Profit a", "Certificate of Existence", and c poration to conduct its affairs in Flo	heck are submitted to regis	
Please return all	correspondence concerning this ma	tter to the following:	
	Joanie Corkrum		
	(Name o	f Person)	
	Air Compassion Florida		
-	(Firm/C	ompany)	TAL SE SE
			LCR S
_		· · · · · · · · · · · · · · · · · · ·	ASS F
4	1620 Haygood Road, Su		SEP 19 P CRETARY OF S AHASSEE, FI
	(Add	iress)	
	Virginia Beach, VA 2345	55	STAT STAT
_	(City/State a	nd Zip Code)	P 2
E 6		a sall.	Market according to the
roi iuititei inioi	mation concerning this matter, pleas	se can.	
Joanie	Corkrum at (	757 271-2294 (Area Code & Daytime Te	
	Name of Person)	(Area Code & Daytime To	elephone Number)
New Fil Division P.O. Bo		New Filing S Division of C Clifton Build	Corporations ing
ı ananas	see, FL 32314	Tallahassee, I	ve Center Circle FL 32301
Enclosed is a ch	ck for the following amount:		
<b>√</b> \$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



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

August 28, 2008

JOANIE CORKRUM AIR COMPASSION FLORIDA 4620 HAYGOOD RD., STE. 1 VIRGINIA BEACH, VA 23455

SUBJECT: AIR COMPASSION, INC.

Ref. Number: W08000040254

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

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

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) 245-6047.

Letter Number: 008A00047947

Carolyn Lewis Regulatory Specialist II

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

### APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

	npassion Florida, In-							
import in Ignous	ation: must include the word "Inge as will clearly indicate that it esent. "Company" or "Co." may	is a corporation	instead of a r	natural person	or partnership if n	ot so cor	of like ntained	
<sub>2.</sub> Virginia	3	3.	26-27	19936				
(State or coun	try under the law of which it is	incorporated)		(FEI number,	, if applicable)			
4. May 6	. 2008	5	Perpe	tual				
(D	ate of Incorporation)				cease to exist or "	perpetua	al")	
,								
6. (Date first condu	cted affairs in Florida if prior to r	egistration. See se	ections 617.15	01 & 617.150.	2, F.S, to determine	penalty	liability.)	
4620 F	laygood Rd., Ste 1	Virginia B	leach V	Δ 23455				
7. 4020 F	laygood rkd., ote 1	(Principal off		7 20 100			<del></del>	
		` •	·		_			
4620 F	laygood Rd., Ste. 1	Virginia E	•		)			
		(Current ma	uling addres:	s)				
<sub>8.</sub> Administer	& expend funds for air	ambulance	services	within the	meaning of	501(c)	)(3) IRS	Code.
(Purpose(s) of c	orporation authorized in home s	tate or country to	be carried o	ut in the state	of Florida)			
9. Name and stre	et address of Florida registere	ed agent: (P.O.	Box <u>NOT</u> a	ecceptable)	SECR FALLA	2008		
Name: _	Ronnie Calugar, Jr		_		CRETARY	- 43S	=	
Office Address:	751 Scrub Jay Dri	ve	_		OF OF	آم D		•
_	St. Augustine		, Florida_	32092	STA:	ŧ <del>.</del>	D	
	(City)				(Zip Code)	3		
Having been nai designated in thi further agree to	agent's acceptance: med as registered agent and i is application, I hereby accep comply with the provisions o ir with and accept the obliga	ot the appointm of all statutes re	ent as regis lative to the	tered agent of proper and	ind agree to act complete perfor	ution at in this o	capacity. I	i es,
		(Registered ag	ent's signatu	re)				

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.

hairman:	James Smith			
ddress:				
	Virginia Beach, VA 23464			
ice Chairn	nan:			
ddress:				
-				
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		STA.	Æ	
ce Presid	ent:	A 3	3	
 ecretary:_	Carol Boyer			
ddress:	1280 Laskin Rd. #401 Virginia Beach, VA 23451			
easurer:	Steve Patterson			
ddress:	8304 North View Blvd. Norfolk, VA 23578	· · · · · · · · · · · · · · · · · · ·	************	

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

James Smith, Chairman (Typed or printed name and capacity of person signing application)

## Commonwealth of Hirginia



### State Corporation Commission

I Certify the Following from the Records of the Commission:

AIR COMPASSION FLORIDA is a corporation existing under and by virtue of the laws of Virginia, and is in good standing.

The date of incorporation is May 06, 2008.

Nothing more is hereby certified.

FILED

7008 SEP 19 P 1: 34

SECRETARY OF STATE



Signed and Sealed at Richmond on this Date: July 31, 2008

Joel H. Peck, Clerk of the Commission