

## Florida Department of State

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### FOREIGN PROFIT/NONPROFIT CORPORATION

E.C. Flights, Inc.

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10/17/2008

#### H08000238391 3

# 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.

			•
(If name unava	diable in Florida, enter alternate corporate na	eme	adopted for the purpose of transacting business in Florida)
Delaware		3.	26-3294067
(State or country	y under the law of which it is incorporated)		(FEI number, if applicable)
05/06/04		5.	Perpetual
(Da	ite of incorporation)		(Duration: Year corp. will cease to exist or "perpetual")
Upon quali			
(Date first trans			transacted business in Florids, insert "upon qualification.", 607.1502 and 817.155, F.S.)
396 Alhen	mbra Circle, Suite 358, Coral		, ,
	(Principal office		
396 Alha	mbra Circle, Suite 358, Coral	Garl	olms. Ft. 33134
	(Current mailing		
			SA
. Any legal	l рихрове		ing
(Purpose	e(s) of corporation authorized in home state of	OF 00	suntry to be carried out in state of Florida)
		nt• :	(P.O. Box or Mail Drop Box NOT acceptable)
. Name and <u>st</u>	<u>reet address</u> of Florida registered <b>a</b> gei		1
. Name and <u>st</u> Name:	Maria dei Carmen de Morla		
Name:		• • • • •	
Name:	Maria del Carmen de Morla	• • • • •	
Name:	Maria dei Carmen de Morla  396 Alhambra Circle, Suite 3	• • • • •	, Florids
Name:	Maria del Carmen de Morla  396 Alhambra Circle, Suite 3  Coral Gables.  (City)	• • • • •	
Name:  ffice Address:  0. Registered  aving been no.	Maria del Carmen de Morla  396 Alhambra Cir:la, Suite 3  Coral Gables,  (City)  agent's acceptance:  med as registered agent and to accept s	58	(Zip code)  ce of process for the above stated corporation at the
Name:  ffice Address:  D. Registered  aving been no.  esignated in th	Maria del Carmen de Morla  396 Alhambra Circle, Suite 3  Coral Gables,  (City)  agent's acceptance:  med as registered agent and to accept s is application, I hereby accept the appo	s a ervi	(Zip code)  ce of process for the above stated corporation at the went as registered agent and agree to act in this capa
Name: ffice Address:  D. Registered aving been naisignated in the orthogonal contract of the orther agree to	Maria del Carmen de Morla  396 Alhambra Circle, Suite 3  Coral Gables,  (City)  agent's acceptance:  med as registered agent and to accept s is application, I hereby accept the appo	ervi inin	(Zip code)  ce of process for the above stated corporation at the went as registered agent and agree to act in this capa elative to the proper and complete performance of m
Name:  ffice Address:  D. Registered laving been na- esignated in the erther agree to	Maria del Carmen de Morla  396 Alhambra Circle, Suite 3  Coral Gables,  (City)  agent's acceptance:  med as registered agent and to accept s is application, I hereby accept the appo	ervi inin	(Zip code)  ce of process for the above stated corporation at the went as registered agent and agree to act in this capa elative to the proper and complete performance of m
Name:  ffice Address:  D. Registered laving been na- esignated in the erther agree to	Maria del Carmen de Morla  396 Alhambra Circle, Suite 3  Coral Gables,  (City)  agent's acceptance:  med as registered agent and to accept s is application, I hereby accept the appo	ervi inin	(Zip code)  ce of process for the above stated corporation at the went as registered agent and agree to act in this capa elative to the proper and complete performance of m
Name:  Office Address:  O. Registered  Iaving been na  esignated in th	Maria del Carmen de Morla  396 Alhambra Circla, Suite 3  Coral Gables.  (City)  agent's acceptance: med as registered agent and to accept s is application, I hereby accept the appo comply with the provisions of all statut ar with and accept the obligations of my	ervi inin	(Zip code)  ce of process for the above stated corporation at the went as registered agent and agree to act in this capa elative to the proper and complete performance of m
Name:  Office Address:  O. Registered Having been na- lesignated in th	Maria del Carmen de Morla  396 Alhambra Circla, Suite 3  Coral Gables.  (City)  agent's acceptance: med as registered agent and to accept s is application, I hereby accept the appo comply with the provisions of all statut ar with and accept the obligations of my	58 ervi intin ints res ry po	(Zip code)  ce of process for the above stated corporation at the went as registered agent and agree to act in this capa elative to the proper and complete performance of m

12. Names and business addresses of officers and/or directors:

14 Maria del Carmen de Morla, Director and Vice President

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

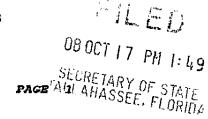
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H08000238391 3

	SECRETAL SECRETARY
A. DIRECTORS	SECRETARY OF STATE AHASSEE, FLORIDA
Chairman:	FLORIDA
Address:	
Vice Chairman:	<del></del>
Address:	<u>.</u>
Director: Javier Morla	
Address: 396 Alhambra Circle, Suite 100, Corel Gables, FL 33134	
	and the second s
Director: Maria del Carmen de Morta	
Address: 396 Alhambra Circle, Suite 100. Coral Gables, PL 33134	
B. OFFICERS	
President: Javier Morla	
Address: 396 Alhambra Circle, Suite 100, Coral Gables, FL 33134	
Vice President: Maria del Carmen de Morla	
Address: 396 Alhambra Circle, Surte 100, Coral Gables, PL 33134	
	,
Scoretary:	
Address:	
Treasurer:	
• •	-
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional officers and	d/or directors.
13	
(Signature of Director or Officer listed in number 12 of the application)	

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# Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HERBY CERTIFY "E.C. FLIGHTS, 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 SEVENTEENTH DAY OF OCTOBER, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "E.C. FLIGHTS, INC." WAS INCORPORATED ON THE SIXTH DAY OF MAY, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

3799863 8300

081047661

for may verify this certificate onli at corp.delaware.gov/authwer.shtml Daniel Smile Hinden

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6918372

DATE: 10-17-08

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