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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(219, 2110, 21, 1110, 11)
PICK-UP WAIT MAIL
(Duringer Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: AIRLOGIC HOLDING SA. CORP. (S. A.)
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," or "Certificate of Good Standing" 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:
FTHAN ALPERT
Name of Person
AIRLOGIC LLC
Firm/Company
6879 ROYAL ORCHIO CIRCLE
Address
Please return all correspondence concerning this matter to the following: ETHAN ACPERT Name of Person AIRLOGIC LLC Firm/Company 6879 ROYAL ORCHIO CIRCLE Address DELRAY BEACH, FL 33446 City/State and Zip code alpert@airlogicHd. Com E-mail address. (to be used for future annual report notification) E-mail address.
City/State and Zip code
alpert@airlogicHd.com Es &
E-mail address. (to be used for future annual report notification)
Name of Person Area Code & Daytime Telephone Number 28
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building Clifton Building P.O. Box 6327 Clifton Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:
\$70.00 Filing Fee \$78.75 Filing Fee \$ \$78.75 Filing Fee \$ Certificate of Status \$78.75 Filing Fee \$ Certificate of Status \$ Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT **BUSINESS IN FLORIDA**

Enter name of c	REIGN CORPORED IC OF CONTROL OF C	HOLOING						-
		nter alternate corpor		·_ ·	•	-	n Florida)	-
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. JULY	19,2	001	5	PERPE	TUAL			_
(Date	of incorporation)	1	(I	Ouration: Year	corp. will cease	to exist or "pe	rpetual")	
. WINTER	(SEE SE	Ate first transacted by CCTIONS 607.1501 My House, (Principal of Current ma	& 607.1502 <i>Que</i>	F.S., to deterr	ARL BORE	DUGH S	TREE AHA L 3:	=TS MA.S 344
EXPO	RT OF 1	PIRCRAFT	PAR	T.S		₹.		
(Purpose(s) of corporation a	uthorized in home s	state or count	ry to be carried	out in state of F	lorida)	17 09	-
		rida registered age				AHA.	SEP 33S	4.0
Name:	ETHA	V ALPE	27			SSE	8	PERSONAL A
Office Address:	6879	N ALPEN ROYAL OF Y BEACK (City)	RCITIA	ciR.		OF SI	PH 2:	M
	DELRA	y BEACE	1	, Florida	33446	Š.	: 02	* Kataland
		,					- -	

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.

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated/nor/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: ETHAN AUPERT		
Address: 6879 ROYAL DRCHIA CIRC	ريح.	
Address: 6879 ROYAL DRCHIA CIRC DELRAY BEACH, FL 334	:46	
Vice Chairman: N/A		
Address:		
Director: W/A		
Address:		
Director: N/A	20 TAI	
Address:	——————————————————————————————————————	<u>T</u>
B. OFFICERS	77) 3	
President: ETHAN ALPERT	2: 0 TAT ORI	
Address: 6879 ROYAL ORCITIO CIRCLE	DA P	
Address: 6879 ROYAL ORCHO CIRCLE OFIRAY BEACH, FL 3344	16	
Vice President:/A		
Address:		
Secretary: ETHAN AZPERT		
Address: 6879 ROYAL ORCHIO CIRCLE	OFIRAY BEACIT, FL	 33446
Treasurer:		
Address:		
NOTE: If necessary, you may attach an addendum to the application listing a	dditional officers and/or directors.	
13. Tellen Alt		
(Signature of Director or Officer listed in number 12 of		
14. ETHAN ALPERT, UPRESIDE		
(Typed or printed name and capacity of person signing	g application)	

