

F090000023693

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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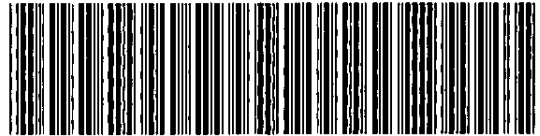
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

114

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: DMS AIRCRAFT SERVICES GROUP, INC.

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:

MONICA JOHNSON

Name of Person

DMS AIRCRAFT SERVICES GROUP, INC.

Firm/Company

6350 SW 3RD STREET

Address

PEMBROKE PINES, FL 33023

City/State and Zip code

mpjohnson@dmsaircraft.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Monica Johnson

Name of Person

at (954) 534-2622

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 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 &
Certificate of Status

☐

\$78.75 Filing Fee &
Certified Cop

☒

\$87.50 Filing Fee,
Certificate of Status &
Certified Copy

**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.

1. DMS AIRCRAFT SERVICES GROUP, INC.

(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. NEVADA

(State or country under the law of which it is incorporated)

3. 27-0814631

(FEI number, if applicable)

4. SEPTEMBER 3, 1999

(Date of incorporation)

5. PERPETUAL

(Duration: Year corp. will cease to exist or "perpetual")

6. NO TRANSACTION HAS BEEN MADE

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 6350 SW 3RD STREET, PEMBROKE PINES, FL. 33023

(Principal office address)

SAME

(Current mailing address)

8. ANY AND ALL LEGAL BUSINESS IN THE AVIATION INDUSTRY

(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: MONICA JOHNSON

Office Address: 6350 SW 3RD STREET

PEMBROKE PINES

(City)

, Florida 33023

(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 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, 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.

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

A. DIRECTORS

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Chairman: MONICA JOHNSON

Address: 6350 SW 3RD STREET, PEMBROKE PINES, FL. 33023

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Vice Chairman: MICHAEL JOHNSON

Address: 6350 SW 3RD STREET, PEMBROKE PINES, FL. 33023

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: MONICA JOHNSON

Address: 6350 SW 3RD STREET, PEMBROKE PINES, FL. 33023

Vice President: MICHAEL JOHNSON

Address: 6350 SW 3RD STREET, PEMBROKE PINES, FL. 33023

Secretary: MONICA JOHNSON

Address: 6350 SW 3RD STREET, PEMBROKE PINES, FL. 33023

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. _____

(Signature of Director or Officer listed in number 12 of the application)

14. MONICA JOHNSON - CHAIRMAN AND PRESIDENT

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


SECRETARY OF STATE

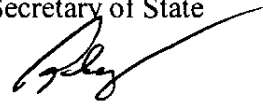


CORPORATE CHARTER

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that **DMS AIRCRAFT SERVICES GROUP, INC.**, did on September 3, 1999, file in this office the original Articles of Incorporation; that said Articles of Incorporation are now on file and of record in the office of the Secretary of State of the State of Nevada, and further, that said Articles contain all the provisions required by the law of said State of Nevada.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on July 13, 2009.


ROSS MILLER
Secretary of State


Certification Clerk



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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