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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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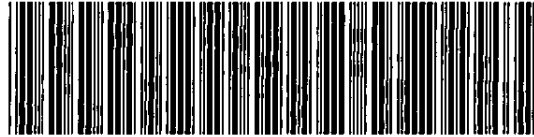
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA
10 MAR 11 AM 10:56

B McKnight MAR 12 2010

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Avmax Montana 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:

Maurizio Primiani
Name of Person
Avmax Montana Inc.
Firm/Company
1930 Airport Court
Address
Great Falls, Montana 59404
City/State and Zip code
mprimiani@avmaxmt.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Marty Craig at (843) 686-3949
Name of Person 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 & Certificate of Status

**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. Avmax Montana, 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. Montana 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. January 12, 2006 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

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

7. 1930 Airport Court, Great Falls, Montana 59404
(Principal office address)

1930 Airport Court, Great Falls, Montana 59404
(Current mailing address)

8. Aviation Support Management Services
(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)

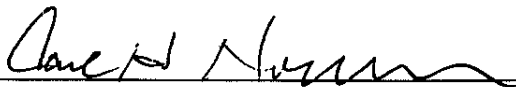
Name: Carl Hoffman, Hoffman & Hertzig, P.A.

Office Address: 901 Ponce de Leon Blvd., Suite 500

Coral Gables, Florida 33134-3073
(City) (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 position 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 state under the law of which it is incorporated.

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

A. DIRECTORS

Chairman: John Binder

Address: 380 McTavish Road NE

Calgary, AB T2E 7G5

Vice Chairman: Don Parkin

Address: 380 McTavish Road NE

Calgary, AB T2E 7G5

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: John Binder

Address: 380 McTavish Road NE

Calgary, AB T2E 7G5

Vice President: Don Parkin

Address: 380 McTavish Road NE, Calgary, AB T2E 7G5

Secretary: Maurizio Primiani

Address: 1930 Airport Court, Great Falls, Montana 59404

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. Don Parkin, Executive Vice President

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

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SECRETARY OF STATE STATE OF MONTANA

CERTIFICATE OF EXISTENCE

I, Linda McCulloch, Secretary of State of the State of Montana, do hereby certify that

AVMAX MONTANA, INC.

duly filed its Articles of Incorporation in this office on 12 January 2006, and on that date was created a body politic and corporate.

I further certify that all fees reflected in the records of the Secretary of State have been paid by said corporation and that the most recent annual report has been filed with this office.

I further certify that no articles of dissolution have been placed on record in this office by said corporation and my records indicate the corporation is in good standing under the laws of the State of Montana and authorized to transact in business and conduct its affairs in this state.

The Secretary of State cannot certify that tax and penalties owed to this state on record with the Department of Revenue are current. Please contact the Department of Revenue at (406) 444-6900 to obtain information on tax status.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of Montana, at Helena, the Capital, this 4 March 2010.

LINDA MCCULLOCH
Secretary of State

Certified File Number: D151769

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FLORIDA