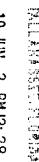
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PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
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Office Use Only



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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: TOTAL AIR SERVICES, INCORPORATED
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:
RALPH CATALA
Name of Person
TOTAL AIR SERVICES, INCORPORATED
Firm/Company
8509 NW 68 STREET
Address
MIAMI, FL 33166
City/State and Zip code
ROBERT@TOTALAIRSVCS.COM
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
RALPH CATALA at (305) 586-5135
Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building Clifton Building Clother Circle Tallahassee, FL 32301 Enclosed is a check for the following amount: MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Tallahassee, FL 32301
✓ \$70.00 Filing Fee

. 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. TOTAL AIR S	ERVICES, INC.			
	corporation; must include "INCORPORAT Corp," "Inc," "Co," or "Corp.")	ΈD	," "COMPANY," "CORPORATION,"	
TOTAL AIR S	ERVICES OF FLORIDA, INC.			
(If name unavail	lable in Florida, enter alternate corporate na	ame	adopted for the purpose of transacting business in Florid	la)
2. DELAWARE		3.	80-0575520	
(State or country	under the law of which it is incorporated)	-	(FEI number, if applicable)	
4. MARCH 30, 2	010	5.	PERPETUAL	
(Date	e of incorporation)		(Duration: Year corp. will cease to exist or "perpetual	")
6. JUNE 01, 201	0			
7 8509 NW 68 S1			in Florida, if prior to registration) 502, F.S., to determine penalty liability)	
, <u> </u>	(Principal office	ado	lress)	_
8509 NW 68 S	TREET, MIAMI, FLORIDA 33166			
	(Current mailing	ado	lress)	_
8. ANY LAWFUL	PURPOSE		ountry to be carried out in state of Florida)	700
(Purpose(s	s) of corporation authorized in home state of	or c	ountry to be carried out in state of Florida)	
9. Name and stree	et address of Florida registered agent: ((P.C	N	/4 -K
Name:	RALPH CATALA			
Office Address:	8509 NW 68 STREET		 & ထ	
	MIAMI		, Florida 33166	
	(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 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.

12. Names and business addresses of officers and/or directors:	. Fa
A. DIRECTORS	ると
Chairman:	
Address:	2 9H
Vice Chairman:	2.38
Address:	
Director: RALPH CATALA	
Address: 16984 SW 144 PL	
MIAMI, FL 33177	
Director: EMILIO DIRUBE	
Address: 5850 SW 86 ST	
SOUTH MIAMI, FL 33143	
B. OFFICERS	
President:	
Address:	
Vice President:	
Address:	
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or direction	ectors.
13. Ratila	
(Signature of Director or Officer listed in number 12 of the application)	
14. RALPH CATALA, DIRECTOR (Typed or printed name and capacity of person signing application)	

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "TOTAL AIR SERVICES, 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 FIRST DAY OF JUNE, A.D.

2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TOTAL AIR SERVICES, INC." WAS INCORPORATED ON THE THIRTIETH DAY OF MARCH, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES

HAVE NOT BEEN ASSESSED TO DATE.

MILLER SECTION (54) [54]

4805973 8300

100613126

AUTHENTICATION: 8027308

DATE: 06-01-10

You may verify this certificate online at corp.delaware.gov/authver.shtml