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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: GAT ENTERPRISES, 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:

SUWAN TANKERSLEY
Name of Person
GAT AIRLINE GROUND SUPPORT, INC.
Firm/Company
8400 AIRPORT BLVD WEST RAMP
Address
MOBILE, AL 36608
City/State and Zip code
SUWAN.TANKERSLEY@GATA93.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SUWAN TANKERSLEY at (251) 683-3888 EXT 107
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 & Certified Copy ☒ \$87.50 Filing Fee, Certificate of Status & Certified Copy

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SECRETARY OF STATE
TALLAHASSEE, FL

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. GAT ENTERPRISES, INC.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

GAT ENTERPRISES OF ALABAMA, INC.
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Alabama 3. 27-0864482
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 8/27/10 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 2/25/10
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 8066 GREENMONT AVE TALLAHASSEE, FL 32317
(Principal office address)
P.O. Box 88052 MOBILE, AL 36608
(Current mailing address)

8. airline support services - have baggage delivery
(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: Sherrie Dian Lensch

Office Address: 8066 Greenmont Ave
Tallahassee, Florida 32317
(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.

Sherrie Dian Lensch
(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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TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: JEAN O. RAINES

Address: P.O. Box 88029 8400 AIRPORT BLVD
MOBILE, AL 36608 WEST RAMP MOBILE, AL 36608

Vice Chairman: JAMES BAGGETT

Address: P.O. Box 88029 8400 AIRPORT BLVD
MOBILE, AL 36608 WEST RAMP MOBILE, AL 36608

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: RICHARD THIEL

Address: 135 PASTIME WAY
FAYETTEVILLE, GA 30214-7619

Vice President: DON KENSCH

Address: 8066 GREENMOUNT AVE.
TALLAHASSEE, FL 32317

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13. Jean O. Raines
(Signature of Director or Officer listed in number 12 of the application)

14. JEAN O. RAINES CHAIRWOMAN
(Typed or printed name and capacity of person signing application)

Beth Chapman
Secretary of State

P.O. Box 5616
Montgomery, AL 36103-5616

STATE OF ALABAMA

I, Beth Chapman, Secretary of State of the State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the domestic corporation records on file in this office disclose that GAT Enterprises, Inc. incorporated in Mobile County, Mobile, Alabama on August 31, 2009. I further certify that the records do not disclose that said GAT Enterprises, Inc. has been dissolved.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the City of Montgomery, on this day.

May 3, 2010

Date

Beth Chapman
Beth Chapman Secretary of State