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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: GOT ENTERPRISES, IDC.
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:
SUDAN TANKERSIEW Name of Person
Name of Person
GOT ZIRLINE GROUND SUPPORT, INC.
Firm/Company
8400 diRPORT BUYD WEST RAMP
Address MOBILE, JL 36608 City/State and Zip code
City/State and Zip code $\mathbf{F}_{G} \approx$
SWAN, TANKERS (EU O OST AGO, COM ES E-mail address: (to be used for future annual report notification) = 7
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
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 & □ \$78.75 Filing Fee & Certificate of Status Certified Copy □ \$87.50 Filing Fee, 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. GOT ENTERPRISES, INC.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")
GAT ENTERPRISES OF BLABAMA, INC.
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2 dhabama 3 27-0864482
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 0/27/10 5. TEHETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6 2 35 17
(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 TauattasseE, FL 32317 (Principal office address)
4.0, 100x 88052 MOBILE, AL 36608 (Current mailing address)
(Curton maining accress)
& JIRLINE SUPPORT DERVICES - HOUR BOAGEAR DELIVER
(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
Tallahassee, Florida 32317 (City) (Zip code)
(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

(Registered agent's signature)

eate of existence duly authenticated, not more than 90 days prior to delivery of

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.

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.

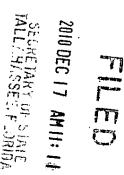
12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Address: Vice Chairman Director: Address: _ Director: Address: _ **B. OFFICERS** President: Address: Vice President: Secretary: Address: _ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer listed in number 12 of the application) 14. TEANO. RAINES ('HAIR WOMAN (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.





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