

Florida Department of State
Division of Corporations

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FOREIGN PROFIT/NONPROFIT CORPORATION JET VERSION INC.

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SECRETARY OF STATE DIVISION OF CORPORATIONS

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(FAX)

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.
TET VERSION TO
(Bnter 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. (State or soluting under the law of which it is incorporated) (FEI number, if applicable)
4. September 14 2007 s. porposition (Duration: Year corp. will cease to exist or "porpetual")
6,
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 3511 Silverside Road Suffe 105 Willmington, New castle Delaware, USA (Margagerico address) Coun
Delaware, USA (Pytogles) orgino eddroses) 190 Bradfoen, lackute Quebor, Camara 1843RR (Current mallifing address)
8. Pichase Sale and modification of Aircrafts. (Purpose(s) of corporation authorized in home state or country to be carried out in state of Fiorida)
9. Name and street address of Florida registered agent: (F.O. Box NOT acceptable)
Name: <u>NXAI Seevices</u> , Inc.
Office Address: 515 Engl Park Avenue
Tilahissee Florida 3230/ (Zip oode)
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
Chalmani Kichaed Tauchette
Address: 150 Brad POED
Address: 150 Bradfoed Lachette Queboc Canada 58+3R8.
Vius Chairman:
Address:
Director:
Address:
Yanani ——————————————————————————————————
Director:
Address:
B. OFFICERS
President: Kichard Touchette
lachette Diebec Canda J8H3R8
TROUTE A MEDIC LOWGO 18H 2KB
Vice Presidents
Address:
Secretary:
Address:
Treatmer:
Address:
NOTE: If necessary, you may attach an addendam to the application listing additional officers and/or directors.
13.
Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes third degree felony as provided for in s.§17.155, F.S.
14. <u>Richard Touchette</u> President
(Typed or printed name and capacity of person signing application)

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Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAMARE, DO REREBY CERTIFY "JET VERSION 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 SIXTEENTH DAY OF NOVEMBER, A.D. 2011.



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AUTHENTICATION: 9161235

DATE: 11-16-11

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