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Office Use Only

W14-57572



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 19, 2014

NATHAN KANAGY COMPASS AIRCRAFT GROUP, INC. 2015 LOCKHEED TERRACE WELLINGTON, FL 33414

SUBJECT: COMPASS AIRCRAFT GROUP, INC.

Ref. Number: W14000057572

We have received your document for COMPASS AIRCRAFT GROUP, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Thomas Chang Regulatory Specialist II New Filing Section

Letter Number: 914A00020145

14 OCT -6 AM 10: 24
SECRETARY OF STAIR

COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: Compass Aircraft Group, 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:		
No House Koupaus		
Nathon Konagy Name of Person		
Comp. 55 Aircreft Group Inc		
2015 Lockhed Terrace Address		
Wellington FL 33414 City/State and Zip code		
City/State and Zip code		
nathan C compessal reroft, com E-mail address: (to be used for future annual report notification)		
E-mail address: (to be used for future annual report notification)	•	
For further information concerning this matter, please call:		
•		
Nothern Kennes 11 31/2 485-5588		
Nother Kenagy at (3/4) 485-5588 Name of Person Area Code & Daytime Telephone Number		
\cdot		
STREET/COURIER ADDRESS: MAILING ADDRESS:		
New Filing Section New Filing Section Division of Corporations Division of Corporations		
Clifton Building P.O. Box 6327	P.O. Box 6327	
2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301		
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 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. Center 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. Kon sas 3. 48-1021731

(State or country under the law of which it is incorporated) (FEI number, if applicable) 4. July 1986 5. perpetual (Duration: Year corp. will cease to exist or "perpetual") 9-15-14
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 2015 Lockheed Terroce Wellington FL 33414

(Principal office address)

2015 Lockheed Terroce Wellington FL 33414

(Current mailing address) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Nother Kenegy

2015 Lockheed Terroce

Wellington, Florida 33414

(City) (Zip code) Office Address: 9. 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.

10. 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.

A. DIRECTORS	
Chairman: Nothon Konogy	
Address: 2015 Lockhead Terroce	
Wellington FL 33414	
Vice Chairman:	
Address:	
Director:	
Address:	
	<u> </u>
Director:	
Address:	2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
B. OFFICERS	<u> </u>
President: Nother Kongy	\$ 4.0
Address: 2015 Lockheed Terrace	
Wellington FL 33414	
Vice President:	
Address:	
Secretary: Nothen Kenegy	
Address: Nother Kenegy Address: 2015 Lackhead Terroce Wellington Treasurer: Nathon Konogy Address: 2015 Lockhead Terroce Wellington	FL 33414
Treasurer: Nathon Konogy	
Address: 2015 Lockheed Terroce Wellington	FL 3344
NOTE: If necessary, you may attach an addendum to the application listing addition	
2. Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 shows	
the officer of director signing this document (and who is listed in humber 12 above	
tree true and that he or she is aware that false information submitted in a document to third degree felony as provided for in s.817.155, F.S.	•
3. Nathau Konagy Pros. (Typed or printed name and capacity of person signing app)	lication)
(1 yped of printed fighter and capacity of person signing app	neanon)

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

STATE OF KANSAS OFFICE OF SECRETARY OF STATE KRIS W. KOBACH

I, KRIS W. KOBACH, Secretary of State of the state of Kansas, do hereby certify, that according to the records of this office.

Business Entity ID Number: 0983189

Entity Name: COMPASS AIRCRAFT GROUP, INC.

Entity Type: DOM: FOR PROFIT CORPORATION

State of Organization: KS

Resident Agent: NATHAN KANAGY

Registered Office: 5819 E CENTRAL, WICHITA, KS 67208

was filed in this office on July 01, 1986, and is in good standing, having fully complied with all requirements of this office.

No information is available from this office regarding the financial condition, business activity or practices of this entity.

In testimony whereof I execute this certificate and affix the seal of the Secretary of State of the state of Kansas on this day of September 08, 2014

KRIS W. KOBACH SECRETARY OF STATE

Certificate ID: 616456 - To verify the validity of this certificate please visit https://www.kansas.gov/bess/flow/validate and enter the certificate ID number.