Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((1115000020005 3)))



H150000200053ABCN

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : .8901617-6381

From:

Account Name : C T COMPORATION SYSTEM

Account Number : FCA000000023 Phone : :850)222-1092

Fax Number : (950) 878-5368

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:______

FOREIGN PROFIT/NONPROFIT CORPORATION

Kodiak AvCo, Co.

Certificate of Status	0
Certified Copy	0
Page Count	08 E
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

5-696

Help

MD 1/30

1/26/2015

1/29/2015 13:18:14 From: To: 8506176381

850-617-6381

1/27/2015 11:35:37 AM PAGE 1/001 Fa



January 27, 2015

FLORIDA DEPARTMENT OF STATE
Division of Corporations

C T CORPORATION SYSTEM

SUBJECT: KODIAK AVCO REF: W15000005684 ADE SUBMITY

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORFORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please list the Federal Employer Identification number in the appropriate section of the application. If applied for, enter "applied for", or if not applicable, enter "N/A".

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$650.00.

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

Maryanne Dickey Regulatory Specialist II New Filing Section

FAX Aud. #: E15000020005 Letter Number: 515A00001603 NECEIVED

15 JH 29 IN 2:58

COVER LETTER

TO: New Filing Section Division of Corporations			
SUBJECT: Kodiak AvCo, Co.			
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:			
Teresa L. Champion			
Name of Person			
Kodiak AvCo			
Firm: Company			
45005 Aviation Drive, Suite 132			
Dulles, VA 20166-7534			
City State and Zip code			
tchampion@skylinkaviation.com			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Teresa Champion at 703 318-4001			
Name of Person Area Code & Daytime Telephone Number			
STREET/COURIER ADDRESS: MAILING ADDRESS: New Filing Section New Filing Section Division of Corporations Division of Corporations			
Clifton Building 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 S78.75 Filing Fee & S78.75 Filing Fee & S87.50 Filing Fee. Certificate of Status Certified Copy Certified Copy			

		ION FOR AUTHORIZATION TO TRANSACT IN FLORIDA
		TATUTES, THE FOLLOWING IS SUBMITTED TO BUSINESS IN THE STATE OF FLORIDA.
Kodiak AvC	> 0, €0.	는 100 년 - 120 년 - 120 년
	orporation; must include "INCORPORATED," or "Corp.")	"COMPANY," "CORPORATION,"
(If name unavaila	ble in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Florida)
Delawar	J.	46-4977855
•	y under the law of which it is incorporated}	46-497.7855 (FEI number, if applicable)
March 4,	, 2014 5.	perpertual .
(Date	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
	//larch 8	3, 2014
	(Date first transacted business in (SEE SECTIONS 607.150) & 607.15	n Florids, if prior to registration) 502, F.S., to determine penalty liability)
45005 Av		Dulles VA 20166-7534
	(Principal office add	
45005 Av	viation Drive Suite 132,	Dulles VA 20166-7534
	(Current mailing add	ress)
Name and <u>stree</u>	n address of Florida registered agent: (P.G NRAI Services Inc.	D. Box <u>NOT</u> acceptable)
ffice Address:	1200 South Pine Island Rd	
	Plantation	, Florida 33324
	(City)	(Zip code)

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.

(Registered agent's signature)

		경 드
11. Names and business addresses of officers and or directors:	7.E	1
A. DIRECTORS Chairman: David J. Dacquino	15.7 15.7	26
	1111	
Address: 45005 Aviation Dr.	 	خت-
Dulles, VA 20166	<u> </u>	
Vice Chairman:	ا در ا در ا	· ~~
Address:		
Dennis Clifford		
Address: 45005 Aviation Dr.		
Dulles, VA 20166		
Director:		
Address:		
B. OFFICERS	<u> </u>	
President: David J. Dacquino		
Address: 45005 Aviation Drive		
Dulles, VA 20166		
Vice President:		
Address:		
Secretary: Teresa Champion		
Address: 45005 Aviation Drive, Dulles VA 20166	<u></u>	
Ireasurer: Dennis Clifford		
Address: 45005 Aviation Drive, Dulles, VA 20166	_	
NOTE: It necessary, you may attach an addengath to the application listing additional officers and/or di	irectors.	
12 - Prisa / Compies		
Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the fact	tu nentaal baa	_
are true and that he or she is aware that false information submitted in a document to the Department of		
a third degree felony as provided for in s.817.155, F.S. , Teresa L. Champion, Secretary		
i a reservición professión de la constanta de		

(Typed or printed name and capacity of person signing application)

Delaware

DACE

W 26 PH 2: 47

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "KODIAK AVCO" 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 TWENTY-SECOND DAY OF JANUARY, A.D.
2015.

5491554 8300

150079744

You may varify this contificate online at corp. delaware.gov/authver.shtml

Jeffrey W. Bullock, Secretary of State

DATE: 01-22-15