F15000004486

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name) W15-65461 (Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
CUE			





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F15-4486

09/29/15--01010--019 **70.00



OCT -9 2015 N. CAUSSEAUX

COVER LETTER

	•
TO: Registration Section Division of Corporations	
SUBJECT: PRECISION AIRPARTS	S SUPPORT SERVICES INC.
	tion - must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation "Certificate of Existence," or "Certificate of Good above referenced foreign corporation to transact bu	
Please return all correspondence concerning this m	atter to the following:
,	e of Person
INCFILE.COM LLC	
Firm/	Company
134 VINTAGE PARK BLVD) A-50
HOUSTON TX 77070	Address
City/Sta	ate and Zip code
E-mail address: (to be u For further information concerning this matter, ple	sed for future annual report notification).
MARSHA SIHA _{st.} 88	8 , 462-3453 X 701
Name of Person Area	Code Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:	
\$70.00 Filing Fee \$ Certificate of Status	□ \$78.75 Filing Fee & □ \$87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 1, 2015

MARSHA SIHA INCFILE.COM LLC 134 VINTAGE PARK BLVD. A-50 HOUSTON, TX 77070

SUBJECT: PRECISION AIRPARTS SUPPORT SERVICES INC.

Ref. Number: W15000065461

We have received your document for PRECISION AIRPARTS SUPPORT SERVICES INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return 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) 245-6051.

Nanette Causseaux Regulatory Specialist II Supervisor

Letter Number: 215A00020813

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO A REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

(Enter name of corporation; must include "INCORPORATED," "("Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	COMPANY," "CORPORATION,"
inc., Co., Corp, inc, Co, or Corp.)	
(If name unavailable in Florida, enter alternate corporate name ado	pted for the purpose of transacting business in Florida)
CALIFORNIA	,
(State or country under the law of which it is incorporated)	(FEI number, if applicable)
11/06/1980	
(Date of incorporation)	(Date of duration, if other than perpetual)
UPON REGISTRATION	•
10555 STANFORD AVE, GARDEI	
(Principal)	office address)
	address, if different)
(Current mailing a	address, if different)
(Current mailing a	Box NOT acceptable)
Name and street address of Florida registered agent: (P.O.) Name: LEGALING CORPORATE SERVICES INC. 5237 SUMMERUM COMMONS SUITE 40	Box NOT acceptable) C OO Box NOT acceptable
Name and street address of Florida registered agent: (P.O. I Name: LEGALINC CORPORATE SERVICES INC. 5237 SUMMERLIN COMMONS SUITE 40	Box NOT acceptable) C OO OO OO OO OO OO OO OO OO
Name and street address of Florida registered agent: (P.O.) Name: LEGALING CORPORATE SERVICES INC. 5237 SUMMERUM COMMONS SUITE 40	Box NOT acceptable) C ALLARY O SECURIARY O

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.

(Registered agent's signature)

.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.

11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: IRA SMITH 10555 STANFORD AVE, GARDEN GROVE CA 92840 Tony Ordaz Jr. Vice Chairman: 2348 W 238th Street, Torrance, CA 90501 Address: IRA.SMITH Director: 10555 STANFORD AVE, GARDEN GROVE CA 92840 Address: Tony Ordaz Jr. Director: 2348 W 238th Street, Torrance, CA 90501 Address: B. OFFICERS: **IRA SMITH** 10555 STANFORD AVE, GARDEN GROVE CA 92840 Tony Ordaz Jr. Vice President: 2348 W 238th Street, Torrance, CA 90501 Address: Secretary: Address: Treasurer: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 12. Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 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 a third degree felony as provided for in s.817.155, F.S. IRA SMITH - PRESIDENT

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

To: 859-245-6030

State of California Secretary of State

CERTIFICATE OF STATUS

PRECISION AIRPARTS SUPPORT SERVICES, INC.



C1029273

CALIFORNIA

JURISDICTION:

STATUS:

ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

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



IN WITNESS WHEREOF, I execute this cartificate and affix the Great Seal of the State of California this day of September 01, 2015.

> **ALEX PADILLA** Secretary of State