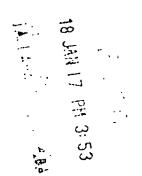
(Re	questor's Name)	
(Ad	dress)	
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□ PICK-UP	WAIT	MAIL
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(Bu	isiness Entity Nam	e)
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Office Use Only



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COVER LETTER

_	tration Section of Cor					
		viation Services. It	nc.			
SUBJECT:		Name	of corporation	ı - must i	nclude suffix	· · · · · · · · · · · · · · · · · · ·
Dear Sir or M	adam:					
"Certificate of	f Existence		e of Good Sta	nding" ar	nd check are sut	ct Business in Florida." omitted to register the
Please return : Roxanne Davis		ondence concerr	ing this matte	r to the f	ollowing:	
			Name of	Person		
Davcor Aviatio	on Services	, Inc.				
			Firm/Con	npany		
PO Box 1522						
			Addr	ess		
La Vernia, TX	78121					
~ ~~~~			City/State a	ınd Zip c	ode	
rdavis@davcor	raviation.co	om				
		E-mail addres	s: (to be used	for futur	e annual report i	notification)
For further int	formation	concerning this r	natter, please	call:		
Roxanne Davis	Š		210	375-	4171	
Name	e of Person	1)	Area Coo) le	4171 Daytime Telep	hone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Enclosed is a check for the following amount:				MAHLING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
■ \$70.00 Fil		S78.75 Filir Certificate	ng Fee & - C		Filing Fee & ed Copy	☐ \$87.50 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.

Davcor Aviation L	Services Inc.				
	orporation; must include "INCORPORATE orp," "Inc." "Co," or "Corp.")	D,	"COMPANY," "CORPORATION,"		
(If name unavaila	able in Florida, enter alternate corporate na	me	adopted for the purpose of transacting bus	iness in Flo	rida)
Texas		2	81-2631053		
	(State or country under the law of which it is incorporated) (FEI number, if appli				
5/16/16	·	5.	Perpetuai		
(Date	of incorporation)		(Date of duration, if other than	perpetual)	_
N/A).					
			n Florida, if prior to registration) 502, F.S., to determine penalty liability)		
?	uite 125, San Antonio, TX 78216			—1, (≱—	<u></u>
	(Prii	ncip	pal office address)	;— ``- }-	23
PO Box 1522, La	Vernia, TX 78121				
	(Current ma	ailir	ng address, if different)		
			,		7)
3. Name and stree	et address of Florida registered agent: ((P.C	D. Box NOT acceptable)		بب
	Registered Agent Solutions, Inc.		, ,	ti Tari Tari (gar-	ان س
Name:				ga-	
Office Address:	155 Office Plaza Dr. Suite A				
	Tallahassee		32301 Florida		
	(City)		(Zip code)		

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.

Justine Karnell, Asst. Secretary

(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 he Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction inder the law of which it is incorporated.

· 11. Names and business addresses of officers and/or directors: A. DIRECTORS Vice Chairman: Michael Davis Director: Address: 137 Conner Creek Dr La Vernia, TX 78121 **B. OFFICERS** Michael Davis President: 137 Copper Creek Dr. Address: La Vernia, TX 78121 Vice President: Roxanne Davis pretary: 137 Copper Creek Dr., La Vernia, TX 78121 E: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer icer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein and that he or she is aware that false information submitted in a document to the Department of State constitutes egree felony as provided for in s.817.155, F.S. (Typed or printed name and capacity of person signing application)



Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Davcor Aviation Services Inc. (file number 802449858), a Domestic For-Profit Corporation, was filed in this office on May 04, 2016.

It is further certified that the entity status in Texas is in existence.

Delayed Effective date: May 16, 2016

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on January 12, 2018.





Rolando B. Pablos Secretary of State

Dial: 7-1-1 for Relay Services
Document: 788283900003