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(Re	questor's Name)			
(Address)				
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(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
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18 MAR 22 PM 2: 30

SECRETARY OF STATE

K. SALY MAR 23 2018

COVER LETTER

	Registration Section Division of Corpor				
	AirStream Pic				
SUBJE	:СТ:	Name of co	orporation -	must include suffix	
Dear Sir	r or Madam:		•		
"Certific		or "Certificate of (Good Stand	ing" and check are sub	nct Business in Florida," omitted to register the
Please re David A	eturn all correspond Fuller	lence concerning t	his matter)	o the following:	
	····		Name of P	erson	
AirStrea	m Pictures, Inc				
25 Wedg	gwood Road		Firm/Comp	any	
Auburn,	ME 04210		Addres	S	
david@a	airstreampictures.com		ty/State and	l Zip code	
		-mail address: (to	be used fo	r future annual report	notification)
For furtl	her information con	cerning this matte	r. please ca	11:	
David Fu	uller	at (207	415-1986	
	Name of Person		Area Code	Daytime Telep	hone Number
	STREET/COURT Registration Section Division of Corport Clifton Building 2661 Executive Cer Tallahassee, FL 32	n uions uer Circle		MAILING A Registration S Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7
Enclosed	d is a check for the	following amount	:		
□ \$70.0	00 Filing Fee	\$78.75 Filing Fe Certificate of St		\$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certificate of Status &

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.

1. (Enter name of c	orporation: must include "INCORPORATED orp." "Inc." "Co." or "Corp.")	." "COMPANY," "CORPORATION,	
AirStream Visu	al Productions, Inc.		
(If name unavail	able in Florida, enter alternate corporate name	adopted for the purpose of transacting	business in Florida)
Maine 2.	7	20-1277311	
(State or country June 24, 2004	ry under the law of which it is incorporated)	(FEI number, if app	
(Date	5. of incorporation)	(Date of duration, if other t	han perpetual)
	(SEE SECTIONS 607.1501 & 607.1 oad, Auburn, Maine, 04210-4751	in Florida, it prior to registration) 1502, F.S., to determine penalty hability ipal office address)	y)
			8
	(Current mail	ing address, if different)	MAR 22 PA
8. Name and street	et address of Florida registered agent: (P.	O. Box <u>NOT</u> acceptable)	
Name:	David Fuller		₩ 2:
Office Address:	BFT International 8205 Nature's Way, Suite 219		\$ B
	Lakewood Ranch	34202 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.

(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	FILED MAR 22 PH 2:30
	18 MAR 22 011
Address:	130 May 100 00 30
	13 Sep. 71 Tes.
Vice Chairman:	
Address:	·
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
David A Fuller	
President:25 Wedgwood Road Address:	
Address: Auburn, ME 04210	
Vice President:	
Address:	
Secretary:	
Address:	
David A Futler Treasurer:	
25 Wedgwood Road, Auburn, ME 04210 Address:	
NOTE: If necessary, you may attach an addendum to the application listing	g additional officers and/or directors.
12. Signature of Director or Officer	
The officer or director signing this document (and who is listed in number	LL above) affirms that the firsts stated begin
are true and that he or she is aware that false information submitted in a do a third degree felony as provided for in \$.817.155, F.S.	cument to the Department of State constitutes
13. David A Fuller, President	
(Typed or printed name and capacity of person sig-	ning application)

State of Maine





Department of the Secretary of State

I, the Secretary of State of Maine, certify that according to the provisions of the Constitution and Laws of the State of Maine, the Department of the Secretary of State is the legal custodian of the Great Seal of the State of Maine which is hereunto affixed and of the reports of organization, amendment and dissolution of corporations and annual reports filed by the same.

I further certify that AIRSTREAM PICTURES is a duly organized business corporation under the laws of the State of Maine and that the date of incorporation is June 21, 2004.

I further certify that on:

June 21, 2004 ARTICLES OF INCORPORATION were filed.

December 04, 2017 CHANGE OF ADDRESS BY NON COMMERCIAL CLERK/REGISTERED AGENT was filed.

No further amendments have been filed to date.

I further certify that said business corporation has filed annual reports due to this Department, and that no action is now pending by or on behalf of the State of Maine to forfeit the charter and that according to the records in the Department of the Secretary of State, said corporation is a legally existing business corporation in good standing under the laws of the State of Maine at the present time.



In testimony whereof, I have caused the Great Seal of the State of Maine to be hereunto affixed. Given under my hand at Augusta, Maine, this thirteenth day of March 2018.

Matthew Dunlap Secretary of State