(Requestor's Name)						
(Address)						
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(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
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M. MILLIGAN AUG 07 2018



June 25, 2018

PATRICK CONTO 4099 WM. PENN HWY #309 MONROEVILLE, PA 15146

SUBJECT: AERO LOGISTICS, INC PENNSYLVANIA

Ref. Number: W18000058589

We have received your document for AERO LOGISTICS, INC PENNSYLVANIA 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 document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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.

Dionne M Scott Regulatory Specialist II

Letter Number: 118A00013148

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COVER LETTER

TO:	P: Registration Section Division of Corporations					
SUBJ	ECT:	AERO	LOGIS	STICS IN	JC.	
2020		Name of	corporation	- must include suffix		
Dear S	ir or Madam:					
"Certif	ficate of Existenc		of Good Stan	ding" and check are sul	net Business in Florida." committed to register the	
Please	return all corresp	oondence concernin	g this matter	to the following:		
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	<u>A</u> EF	RO LOGI	STICS	,INC		
	40,	99 WM.			509	
			Addre			
	M	ONROEVI	LE TA	d Zip code SGISTICS . NE or future annual report		
	~		City/State ar	d Zip code		
	P<	ONTO Q A	ERO-LO	BU. CILICIDO	T	
		E-mail address:	(to be used to	or future annual report	notification)	
For fur	ther information	concerning this ma	tter, please e	all:		
	PATRICK	CONTO a	u 410) 445-49	731	
	Name of Perso	n	Area Code	Daytime Telep	hone 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			
Enclos	sed is a check for	the following amou	ınt:			
57 (0.00 Filing Fee	□ \$78.75 Filing Certificate of		\$78.75 Filing Fee & Certified 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. AERO LOGISTICS, INC.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp." "Inc." "Co," or "Corp.") AERO LOGISTICS INC PENNSTLVANIA

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 2. PENNSYLVANIA 3. 20-408-5883 (State or country under the law of which it is incorporated) (FEI number, if applicable) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) BLUD 1603, PEMPANIO BEACH, FE 33062 (Current mailing address, if different) 8. Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable) PATRICK E CONTO

111. N. POMPANO BEH BLUD # 1603

Pom Panio BEACH . Florida 33062
(City) (Zip code) Name:

9. Registered agent's acceptance:

Office Address:

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.

11. Names and business addresses of officers and/or directors: PATRICK 15668 **B. OFFICERS** PATRICK CYPRESS DR., MURRYSVILLE Treasurer: ___ NICHOLAS CIRCLE, BORA RATON, 33431 NOTE: 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. PATRICK E. CONTO TRESIDENT

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

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE

06/21/2018

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

AERO LOGISTICS, INC.

is duly registered as a Pennsylvania Business Corporation under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written

Acting Secretary of the Commonwealth

Certification Number: TSC180621100524-1

Verify this certificate online at http://www.corporations.pa.gov/orders/verify