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Office Use Only

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SEP 17 2013 M. SOLOMOIN

COVER LETTER

TO: Registration Section Division of Corporations					
·	Minnesota Corporation	1			
SUBJECT:	Name of corporatio	n - must include	suffix		
Dear Sir or Madam:					
The enclosed "Application by Fo "Certificate of Existence," or "Ce above referenced foreign corpora	rtificate of Good Sta	nding" and chec			
Please return all correspondence Tori Palpant, Sr. Paralegal	concerning this matte	er to the following	ığ:		
	Name of	Person			
Sun Country Country, Inc.					
	Firm/Co	npany			
1300 Corporate Center Curve					
	Add	ress			
Eagan, Minnesota 55121					
	City/State	and Zip code			
tori.palpant@suncountry.com					
E-mai	l address: (to be used	for future annu-	al report no	otification)	
For further information concerning	ng this matter, please	call:			
Richard Coates	850	681-1029			
Name of Person	at (Area Co	de Dayti	me Teleph	one Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		Regi Divi P.O.	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Enclosed is a check for the follow	wing amount:				
	.75 Filing Fee & tificate of Status	S78.75 Filing Certified Co	_	☐ \$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.

Sun Country, Inc.	c.		
(Enter name of co	orporation; must include "INCORPORATED," 'orp," "Inc," "Co." or "Corp.")	COMPANY," "CORPORATION,"	
Sun Country, In	c., a Minnesota Corporation		
(If name unavaila	able in Florida, enter alternate corporate name ad	opted for the purpose of transacting bu	siness in Florida)
Minnesota 2.	3	5-2159124	
(State or countr	y under the law of which it is incorporated)	(FEI number, if applica	ble)
05/31/2019 4.	of incorporation) 5		
(Date	of incorporation)	(Date of duration, if other than	perpetual)
05/31/2019 6.			
	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.150)		
1300 Corporate C	Center Curve, Eagan, Minnesota 55121	, , , , , , , , , , , , , , , , , , ,	
	(Principal	office address)	2013 S
	(Current mailing	address, if different)	P .
8. Name and street	et address of Florida registered agent: (P.O.	Box NOT acceptable)	
Name:	Cogency Global Inc.		် ကို က
Office Address:	115 North Calhoun Street, Suite 4		· ' &
	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.

Mendt Walker, 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 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. DIR	ECTORS		
Chairman			
Address:			
	Eagan, Minnesota 55121		
Vice Cha	irman:		
Address:			
Director:	David M. Davis		
Address:	1300 Corporate Center Curve		
riddi Coo.	Eagan, Minnesota 55121		
Director:			
Address:			
B. OFF	TICERS		20.13
President	Jude I. Bricker	·	S.
Address:	1300 Corporate Center Curve		<u>-</u>
	Eagan, Minnesota 55121	: #r	<u> </u>
Vice Pres	sident:	12 ·	<u>မှ</u> မှ
Address:			
Secretary	Eric M. Levenhagen		
Address:	1300 Corporate Center Curve, Eagan, Minnesota 55121		
Treasure	r:		
Address:			
NOTE:	If necessary, you may attach an addendum to the application listing additional officers and/or	director	rs.
12.			
are true	Signature of Director or Officer icer or director signing this document (and who is listed in number 11 above) affirms that the fand that he or she is aware that false information submitted in a document to the Department of degree felony as provided for in s.817.155, F.S.	acts state	ed herein constitutes

13. Jude I. Bricker, President and CEO

Office of the Minnesota Secretary of State Certificate of Good Standing

I, Steve Simon, Secretary of State of Minnesota, do certify that: The business entity listed below was filed pursuant to the Minnesota Chapter listed below with the Office of the Secretary of State on the date listed below and that this business entity is registered to do business and is in good standing at the time this certificate is issued.

Name: Sun Country, Inc.

Date Filed: 05/31/2019

File Number: 1087142600068

Minnesota Statutes, Chapter: 302A

Home Jurisdiction: Minnesota

This certificate has been issued on: 09/12/2019

OF THE STATE OF MALE

Ateve Pinn Steve Simon

Secretary of State State of Minnesota