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## **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: PIONEER JETS CORP			
	of corporation	- must include suffix	
Dear Sir or Madam:			
The enclosed "Application by Foreign Co" "Certificate of Existence," or "Certificate above referenced foreign corporation to tra	of Good Stan	ding" and check are submitte	
Please return all correspondence concernit	ng this matter	to the following:	
Tatsiana Peters			
	Name of	Person	
PIONEER JETS CORP			
-	Firm/Com	pany	
1451 W Cypress Creek Rd, STE 300			
	Addre	ess	
Fort Lauderdale, FL 33009			
	City/State at	nd Zip code	
ops@pioneerjets.com			2
E-mail address:	(to be used f	or future annual report notific	cation)
For further information concerning this ma	atter, please c	all:	20 Jiji - 6
Tatsiana Peters	775 at (	<u>527-0414</u>	
Name of Person	at ( Area Code	Daytime Telephone	Number 5: 03
STREET/COURIER ADDRESS Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	S:	MAILING ADDR Registration Section Division of Corpora P.O. Box 6327 Tallahassee, FL 32	ESS: n ations
Enclosed is a check for the following amore Please make check payable to: FLORIDA DE \$70.00 Filing Fee	PARTMENT 5	!	\$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.

PIONEER JET	'S CORP		
(Enter name of c	orporation; must include "INCORPORATEI orp," "Inc," "Co," or "Corp.")	D," "COMPANY," "CORPORATION,"	
n/a			
(If name unavail	able in Florida, enter alternate corporate nam	e adopted for the purpose of transacting bu	siness in Florida)
DELAWARE	3	84-4062025	
(State or countr	y under the law of which it is incorporated)	(FEI number, if applica	uble)
12/19/2019	5	n/a	
(Date	of incorporation)	(Date of duration, if other than	perpetual)
n/a 5.			
		in Florida, if prior to registration) 1502, F.S., to determine penalty liability)	
1451 W Cypres	s Creek Rd, STE 300 Fort Lauderdale, F	∟ 33009	
· · <u> </u>	(Principal of	fice street address)	
	(Current mail	ing address, if different)	
			2070, 1111
<ol><li>Name and street</li></ol>	et address of Florida registered agent: (P.	O. Box NOT acceptable)	
Name:	Tatsiana Peters		1
Office Address:	1451 W Cypress Creek Rd, STE 300		<u>ு</u>
office Address.	Fort laudordala	22000	Pi
	Fort Lauderdale	, Florida	5: 03
	(City)	(Zip code)	ū
Having been nam lesignated in this further agree to c	ent's acceptance: ed as registered agent and to accept ser application, I hereby accept the appoint omply with the provisions of all statutes	tment as registered agent and agree to relative to the proper and complete pe	act in this capacity.
nd I am familiar	with and accept the obligations of my p	osition as registered agent.	
_	(Registered agent's	signature)	
10 - A 44 1 1 1	certificate of existence duly authenticated	I not more than 90 days prior to delive	ar of this application

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

under the law of which it is incorporated.

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

A. DIRECTORS	• •			
	Tatsiana Peters	DCL-:	<b>N</b>	
□Chairman	Name:1451 W Cypress Creek Rd	□ Chairman	Name: _	
□Vice Chairmaπ	Address:STE 300	□Vice Chairman	Address	
Director		□Director		
□President	Fort Lauderdale, FL 33009	□President	<del></del>	1
■Vice President		□Vice President		
□Secretary	□Treasurer	Secretary		□Treasurer
Other	Other	Other		□Other
□Chairman	Name:	□ Chairman	Name: _	
	Address:	□Vice Chairman	Address	
□Director	<del></del>	□Director		
□President		□President		
□Vice President		□Vice President	-	
☐ Secretary	□Treasurer	□Secretary		□Treasurer
□Other	Other	□Other		Other
□Chairman	Name:	□Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman		021
□Director		□Director		
				5
□ President _		□President		
□Vice President	<del></del>	□Vice President		<u> </u>
□Secretary	□Treasurer	☐ Secretary		□Treasurer ω
Other	Other	□Other		□Other
Important Notice: I individuals may be	Jse an attachment to report more than six (6). The attac added to the index when filing your Florida Departme	chment will be imaged nt of State Appual Re	d for repo	rting purposes only. Non-indexed
12		II' /		
she is aware that fa s.817.155, F.S.	Signature of Director of Signature of Director of Signature of Director of Dir	r 11 above) affirms th		
13. Tatsiana Pet	ers / Vice President  (Typed or printed name and capacity of person	,		
	cryped or printed name and capacity of perso	ur signing abblication	,	

Page 1

## Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "PIONEER JETS CORP" IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS

OF THIS OFFICE SHOW, AS OF THE TWENTY-FOURTH DAY OF JUNE, A.D.

2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PIONEER JETS
CORP" WAS INCORPORATED ON THE NINETEENTH DAY OF DECEMBER, A.D.
2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE
BEEN PAID TO DATE.

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Authentication: 203163714

Date: 06-24-20