F210000041

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
·				
1: 19 700000000000000000000000000000000000				
[W 300001]26183.				





900352055009

10/28/20--01014--031 **70.00





FLORIDA DEPARTMENT OF STATE Division of Corporations

November 3, 2020

MARTIN LOPEZ ONE SE THIRD AVE STE 1100 MIAMI, FL 33131

SUBJECT: LILIUM AVIATION INC Ref. Number: W20000126982

We have received your document for LILIUM AVIATION INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name you requested is unavailable, as it is being held for another entity pending corrections and resubmission.

An out-of-state corporation whose name is not available must adopt an alternate name for use in Florida. The alternate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate name in the space provided in number one of the application.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Yvette Scott Document Specialist II

SECENTO JAN JO JUE

Letter Number: 920A00021982

COVER LETTER

	stration Section sion of Corporations						
SUBJECT:	Lilium Aviation Inc						
Name of corporation - must include suffix							
Dear Sir or M	1adam:						
"Certificate of	I "Application by Foreign C of Existence." or "Certificate need foreign corporation to	e of Good Stand	ing" and check are subr	t Business in Flor mitted to register t	ida." he		
Please return	all correspondence concern	ning this matter t	o the following:		_		
Martin Lopez	-				2021		
		Name of P	erson	石 語	JAN		
Marcum LLP				1 4 1 1	2 2	in the second	
		Firm/Comp	any	ທີ່		ī.	
One SE third.	Ave Ste 1100				PA	Ċ	
	<u> </u>	Addres	S	75	<u></u>	_	
Miami, FL, 33	3131			:	61		
		City/State and	d Zip code			-	
martin.lopez@	marcumllp.com						
	E-mail addres	ss: (to be used fo	r future annual report n	otification)			
For further in	nformation concerning this	natter, please ca	11:				
Martin Lopez at (786 757122		7571227		_			
Nan	ne of Person	Area Code	Daytime Teleph	none Number			
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314				
Enclosed is a Please make c	a check for the following an check payable to: FI.ORIDA I ling Fee	DEPARTMENT (\Box	OF STATE \$78.75 Filing Fee & Certified Copy	S87.50 Filir Certificate Certified C	of Statu	15 &	

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.

i Inc			
rorporation; must include "INCORPORATED," * forp," "Inc," "Co," or "Corp,")	"COMPANY," "CORPORATION,"		
n USA Inc			
•	opted for the purpose of transacting business in Florida)		
3. 30	(FEI number, if applicable)		
y under the law of which it is incorporated)	(FEI number, if applicable)		
of incorporation)	(Date of duration, if other than perpetual)		
	2021 도만		
	E.S. to determine negative liability.		
rive, Wilmington, DE, 19808	222		
(Principal office	street address) STEP 4: 49 address. if different)		
(Current mailing a	address, if different)		
et address of Florida registered agent: (P.O. I	Box NOT acceptable)		
Mark Chaves CPA PA	<u> </u>		
15200 SW 42 Terrace			
Miami	Florida 33196		
(City)	, Florida 33196		
application, I hereby accept the appointment omply with the provisions of all statutes rela	of process for the above stated corporation at the place at as registered agent and agree to act in this capacity. I ative to the proper and complete performance of my dutic ion as registered agent.		
(Registered agent's sign	ature)		
	orporation; must include "INCORPORATED." orp.," "Inc." "Co." or "Corp.") In USA Inc able in Florida, enter alternate corporate name add y under the law of which it is incorporated) (Date first transacted business in F (SEF SECTIONS 607.1501 & 607.1502 rive, Wilmington, DE, 19808 (Principal office (Current mailing a et address of Florida registered agent: (P.O. I Mark Chaves CPA PA 15200 SW 42 Terrace Miami (City) ent's acceptance: and as registered agent and to accept service application, I hereby accept the appointmer omply with the provisions of all statutes rela- with and accept the obligations of my positi		

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.

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

A. DIRECTORS	• • •		
□ Chairman	Name: Remo Gerber	□Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
■Director	Wilmington, DE, 19808	□Director	
□President	<u></u>	□President	
□Vice President		□Vice President	
□Secretary	□Treasurer	□Secretary	□Treasurer
□Other	Other	□Other	□Other
□Chairman	Name:	□Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
□Director		□Director	
□President		□President	2021
□Vice President		□Vice President	A TI
□Secretary	□Treasurer	□Secretary	Teastifer T
☐Other		□Other	
			TATE
□ Chairman	Name:	□Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
□Director		□Director	
□President		□President	
□Vice President		□Vice President	
□Secretary	□Treasurer	□Secretary	□Treasurer
□Other		□Other	□Other
individuals may be	Use an attachment to report more than six (6). The attact added to the index when filing your Florida Department	nt of State Annual Re	eport form.
14.	Signature of Director of	r Officer	
she is aware that fa s.817.155, F.S.	etor signing this document (and who is listed in number lise information submitted in a document to the Departi		
13. Remo Gerbe	er, Director		· · · · · · · · · · · · · · · · · · ·



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

DELAWARE, DO HEREBY CERTIFY THAT "LILIUM AVIATION INC." IS DULY

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

STANDING AND HAS A LEGAL CORPORATE EXISTENCE NOT HAVING BEEN

CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE SHOW

AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

THE FOLLOWING DOCUMENTS HAVE BEEN FILED:

CERTIFICATE OF INCORPORATION, FILED THE FIRST DAY OF JULY 3A.D.

2020, AT 1:20 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CERTIFICATE IS THE ONLY PAPER OF RECORD, THE CORPORATION OF THE QUESTION NOT HAVING FILED AN AMENDMENT NOR HAVING MADE ANY CHANGE WHATSOEVER IN THE ORIGINAL CERTIFICATE AS FILED.

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

Authentication: 204269481

Date: 12-09-20