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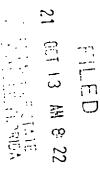
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COVER LETTER

Division of Corporations		
SUBJECT: F & E Aviation Holdings, Inc.		
Name of corporati	on - must include suffix	
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation for "Certificate of Existence," or "Certificate of Good St above referenced foreign corporation to transact busing	anding" and check are submitted to register the	
Please return all correspondence concerning this mat	ter to the following:	
Guy Tickner		
Name o	of Person	
F&E Aviation Holdings, Inc.		
Firm/Co	ompany	
657 South Drive Suite 306		
Ad	dress	
Miami Springs, FL 33166		
City/State	and Zip code	
gtickner@feaircraft.com		
E-mail address: (to be use	d for future annual report notification)	
For further information concerning this matter, please	e call:	
Guy Tickner 305	ode Daytime Telephone Number	
Name of Person Area Co	ode Daytime Telephone 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 check for the following amount: Please make check payable to: FLORIDA DEPARTME: \$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status	NT OF STATE \$78.75 Filing Fee & \$87.50 Filing Fee, Certified Copy Certified Copy 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.

	orporation: must include "INCORPORATED, orp.," "Inc.," "Co." or "Corp.")	" "COMPANY," "CORPORATIO	N."
(If name unavail	able in Florida, enter alternate corporate name	adopted for the purpose of transact	ing business in Florida)
Delaware	3		
(State or countr	y under the law of which it is incorporated)	(FEI number, if a	applicable)
(Date	of incorporation)	(Date of duration, if other than perpetual)	
6. 8/1/2021			
7	Suite 306 Miami Springs, FL 33166 (Principal off	ice <u>street</u> address)	
	(Current mailing address, if different)		21
8. Name and stre Name:	et address of Florida registered agent: (P.6 Guy Tickner	O. Box <u>NOT</u> acceptable)	
Office Address:	657 South Drive Suite 306		- Par ≥ □
Office Address:	Miami Springs	 . Florida 33166	M 8: 22

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.

A. DIRECTORS	• •		
■ Chairman	Fred Murphy Name:	□Chairman	Name: Cam Murphy
□Vice Chairman	Address: 657 South Drive Suite 306	□Vice Chairman	Address: 657 South Drive Suite 306
□Director	Miami Springs, FL 33166	□Director	Miami Springs, FL 33166
□President		■ President	
□Vice President		□Vice President	
□Secretary	□Treasurer	☐ Secretary	☐Treasurer
■Other	Other	Other	Other
□Chairman □Vice Chairman □Director □President ■Vice President ■Secretary ■Other □CFO	Address: 657 South Drive Suite 306 Miami Springs, FL 33166 Treasurer Other	☐ Director ☐ President	Name:
□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	□ Other
The officer or direction is aware that fas.817.155, F.S.	Use an attachment to report more than six (6) The added to the index when filing your Florida Department of Direct Signature of Direct ctor signing this document (and who is listed in nuralse information submitted in a document to the Department of the Department	iment of State Annual Re or or Officer nber 11 above) affirms th	at the facts stated herein are true and that he or

Page 1



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

DELAWARE, DO HEREBY CERTIFY "F & E AVIATION HOLDINGS, INC." 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 TWENTIETH DAY OF SEPTEMBER, A.D.

2021.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "F & E AVIATION HOLDINGS, INC." WAS INCORPORATED ON THE TENTH DAY OF JUNE, A.D. 1999.

Authentication: 204202972

Date: 09-20-21

3054807 8300

SR# 20213292636