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CORPORATE ACCESS, _

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INC.

236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

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COVER LETTER

~	stration Section sion of Corporations						
SUBJECT:	GLOBAL CROSSING AIRLI	NES INC.					
Name of corporation - must include suffix							
Dear Sir or M	1adam:						
"Certificate of	"Application by Foreign Cor of Existence," or "Certificate of need foreign corporation to tra	of Good Stand	ing" and check are submitt				
Please return	all correspondence concernir	g this matter	o the following:				
JAHAN S. IS	LAMI, ESQ.			_			
		Name of P	erson				
COZEN O'CO	ONNOR						
	•	Firm/Comp	pany	•			
200 S BISCA	YNE BLVD., SUITE 3000						
		Addre:					
MIAMI, FL.	33131						
4		City/State an	d Zip code				
MROMERO(@COZEN.COM						
	E-mail address:	(to be used fo	or future annual report notif	ication)			
For further in	nformation concerning this ma	utter, please ea	ill:				
MARSHA ROMERO 305			704-5940				
Nan	ne of Person	Area Code	Daytime Telephone	e Number			
Regi Divi The 2415	stration Section sion of Corporations Centre of Tallahassee 5 N. Monroe Street, Suite 810 ahassee, FL 32303		MAILING ADD Registration Secti Division of Corpo P.O. Box 6327 Tallahassee, FL 3	on orations			
	a check for the following amo theck payable to: FLORIDA DF ling Fee	PARTMENT 2 Fee &		\$87.50 Filing Fee. Certificate of Status & Certified Copy			

GLOBAL CROSSING AIRLINES OPERATIONS LLC 600 BRICKELL AVENUE 19TH FLOOR MIAMI, FL 33131

VIA FACSIMILE 850-245-6804

February 10, 2022

Department of State
Division of Corporations
Section Name
P.O. Box 6327
Tallahassee, FL 32314

2022 FEB 17 PH 12: 06 SECNO LAGY OF STAR SMILAR SSEET OF FORM

APPROVED AND FILED

Re: GLOBAL CROSSING AIRLINES INC (Foreign Qualification)

Dear Sir or Madam:

Please accept this letter as authorization from Global Crossing Airlines Operations LLC, Document Number: L18000228809, that we hereby authorize the use and name to transact business in Florida in our past entity name of Global Crossing Airlines LLC. We will be filing Application by Foreign Corporation for Authorization to Transact Business in Florida by our Delaware entity called Global Crossing Airlines Inc.

If you need additional assistance, please feel free to contact me.

GLOBAL CROSSING AIRLINES OPERATIONS LLC

By Edward J Wegel
Edward J. Wegel, Manager

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.

2. DELAWARE (State or country under the law of which it is incorporated) 4. 09/07/2018 (Date of incorporation) (Date of incorporation) (Date of duration, if other than perpetual) 6. (Date of duration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7. 600 BRICKELL AVENUE, 19TH FLOOR, MIAMI, FL 33131 (Principal office street address) (Current mailing address, if different) Name: Edward J. Wegel Name: Edward J. Wegel 4200 NW 36 St., Bildg. 5A Office Address: Building 5A Miami (City) (City) Registered agent's acceptance:	(If name unavailab	ole in Florida, enter alternate corporate	name adopted for the pu	rpose of transacti	ng business in Florida)	-
(State or country under the law of which it is incorporated) 4. 09/07/2018 (Date of incorporation) (Date of duration, if other than perpetual) (Date of incorporation) (Date of duration, if other than perpetual) (Date of duration, if other than perpetual) (Date of incorporation) (Date of duration, if other than perpetual) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7. 600 BRICKELL AVENUE, 19TH FLOOR, MIAMI, FL 33131 (Principal office street address) (Current mailing address, if different) (Current mailing address, if different) Name: Edward J. Wegel Address: Edward J. Wegel Address: Building 5A Miami (City) (City) (City) (City) (FEI number, if applicable) (Date of duration, if other than perpetual)	DELAWARE					
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(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7. 600 BRICKELL AVENUE. 19TH FLOOR, MIAMI, FL 33131 (Principal office street address) (Current mailing address, if different) Rame: Edward J. Wegel 4200 NW 36 St., Bldg. 5A Office Address: Building 5A Miami (City) Physical 33166 (City) Registered agent's acceptance:	09/07/2018		5			
(Current mailing address, if different) Name: Edward J. Wegel 4200 NW 36 St., Bldg, 5A Office Address: Building 5A Miami (City) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) (Principal office street address) (Current mailing address, if different) ADGRAPH PR ADGRAPH ADGR	(Date of incorporation) (Date of duration, if other than perpetual					_
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(Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Edward J. Wegel 4200 NW 36 St., Bldg. 5A Building 5A Miami (City) Registered agent's acceptance:	600 BRICKELL A				•	
(Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Edward J. Wegel 4200 NW 36 St., Bldg. 5A Office Address: Building 5A Miami (City) Registered agent's acceptance:	/	(Princi	pal office street address)			
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Edward J. Wegel						
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8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Edward J. Wegel 4200 NW 36 St., Bldg. 5A Building 5A Miami (City) Registered agent's acceptance:						Þ
Office Address: 4200 NW 36 St., Bldg. 5A	8. Name and <u>street</u>	address of Florida registered agen-	t: (P.O. Box <u>NOT</u> aec	eptable)		F _≥ P
(City) (Zip code) 9. Registered agent's acceptance:	Name:	Edward J. Wegel				
(City) (Zip code) 9. Registered agent's acceptance:	ranic.	4200 NW 36 St., Bldg. 5A			e e e e e e e e e e e e e e e e e e e	É
(City) (Zip code) Registered agent's acceptance:	Office Address:	Building 5A			€	\
9. Registered agent's acceptance:		Miami	, Florida	33166	36	
		(City)		(Zip code)		
	O Bogistared again	at*c accontance				
Having been named as registered agent and to accept service of process for the above stated corporation at the pla			ot service of process for	r the above state	ed corporation at the	e place
designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacit	designated in this o	ipplication, I hereby accept the ap	pointment as registere	d agent and agi	ree to act in this cap	acity. I
further agree to comply with the provisions of all statutes relative to the proper and complete performance of my a and I am familiar with and accept the obligations of my position as registered agent.		mply with the provisions of all sta	tutes relative to the pro my nosition as registed	oper and complo red avent.	ete perjormance oj n	ту аннес

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.

DocuSign Envelope (D: D2559C22-9C95-46F5-8076-4C5D07D54D79

A. DIRECTORS Name: Joseph DaGrosa Name: Edward J. Wegel □Chairman ■Chairman Address: ____ 2333 Ponce de Leon Address: □Vice Chairman □Vice Chairman Coral Gables, FL 33146 Suite 630 Director ■ Director Coral Gables, FL 33134 □President □President □Vice President □Vice President □Secretary □Treasurer □ Secretary □Treasurer Other _____ Other _____ □Other ______ Other Ryan Goepel □ Chairman Name: □Chairman 7502 SW 58th Avenue □Vice Chairman Address: ☐ Vice Chairman Address: South Miami, FL 33143 Director □Director □President President □Vice President ___ ☐ Vice President □Treasurer □ Secretary ☐Treasurer □ Secretary ■Other <u>Ĉ</u>FO □Other _____ □Other _____ □Other ____ Name: _____ Name: □ Chairman □Chairman Address: □Vice Chairman Address: _____ ☐ Vice Chairman Director Director ☐ President □President ☐ Vice President □ Vice President □ Secretary Treasurer ☐ Treasurer ☐ Secretary □Other ____ Other _____ Other _____ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form. Edward J Wegel 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.

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

DELAWARE, DO HEREBY CERTIFY "GLOBAL CROSSING AIRLINES, 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 ELEVENTH DAY OF FEBRUARY,

A.D. 2022.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GLOBAL CROSSING AIRLINES, INC." WAS INCORPORATED ON THE SEVENTH DAY OF SEPTEMBER, A.D. 2018.

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

Authentication: 202636849

Date: 02-11-22

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