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CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

03/10/2022

D	ate:	03/10/2022		~: ()>W		
		Acc#I20160000	1072 W	1: () - W		
Name:	ACC Avi	ation, Inc.				
Document #:		-				
Order #:	1420464	8				
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of Apostille/Notarial Certification:		Country of Destinat	ion:		7077 FEB 10 PM 2: 00	######################################
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		(Thank you!))			

COVER LETTER

	stration Section ion of Corporation	15			
SUBJECT:	ACC AVIATION	INC.			
SODJECT.		Name of corporation	- must include suffix		
Dear Sir or M	ladam:				
"Certificate o	f Existence." or "C		Authorization to Transac ding" and check are sub ss in Florida.		
Please return	all correspondence	e concerning this matter	to the following:		
Richard Danie	l				
		Name of	Person		
ACC AVIATI	ON INC.				
		Firm/Con	pany		_
Priory Gate, 13	8 Castlefield Road,	Reigate			
		Addr	ess	· · · ·	20
Surrey, RH2 0	AP, United Kingdo	ın		<u></u>	122 F
		City/State a	nd Zip code		2022 FEB 10
Richard.daniel	@accaviation.com			3.	_0_
	E-ma	ail address: (to be used l	or future annual report n	otification)	P
For further in	formation concerr	ing this matter, please o	all:	<u>-11</u> .	PH 2: 00
Richard Danie	1	at (7990069325	•	0
Nam	e of Person	Area Cod		hone 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			
	ing Fee \$7	ORIĎA DEPARTMENĮ	OF STATE \$78.75 Filing Fee & Certified Copy	S87.50 Filing Certificate of Certified Cop	`Status &

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.")	"COMPAN	Y," "CORPORATION	
(If name unavail	able in Florida, enter alternate corporate name ad	opted for th	e purpose of transacting	g business in Florida)
DELAWARE	3			<u></u>
(State or countr	y under the law of which it is incorporated)		(FEI number, if app	olicable)
12/13/2018	5		te of duration, if other the	
(Date	of incorporation)	(Da	te of duration, if other t	han perpetual)
	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.150	2, F.S., to d	etermine penalty liabilit	y)
550 SOUTH AN	DREWS AVENUE, SUITE 310, FORT LAUDE	RDALE, F	L 33301	
	(Principal office			
	(Current mailing	address, if	lifferent)	
	(Current mailing	address, if	lifferent)	72
Name and stree	(Current mailing et address of Florida registered agent: (P.O.			20221
Name and stree				7022 FEB
Name:	et address of Florida registered agent: (P.O.			2022 FEB 10
Name:	et address of Florida registered agent: (P.O. C T Corporation System			10 PH
	et address of Florida registered agent: (P.O. C T Corporation System 1200 South Pine Island Road	Box <u>NOT</u> 	_acceptable)	10 PH
Name: ffice Address:	et address of Florida registered agent: (P.O. C T Corporation System 1200 South Pine Island Road Plantation (City)	Box <u>NOT</u> 	_acceptable)	, 0
Name: ffice Address: Registered ago	et address of Florida registered agent: (P.O. C T Corporation System 1200 South Pine Island Road Plantation (City) ent's acceptance:	Box <u>NOT</u> — — FL	_acceptable) 33324 (Zip code)	10 PH 2:00
Name: ffice Address: Registered againg been namesignated in this	et address of Florida registered agent: (P.O. C T Corporation System 1200 South Pine Island Road Plantation (City) ent's acceptance: red as registered agent and to accept service application, I hereby accept the appointme	Box <u>NOT</u> FL of proces nt as regis	_acceptable) 33324 (Zip code) s for the above stated agent and agree	corporation at the place e to act in this capacity.
Name: ffice Address: Registered ago aving been namesignated in this orther agree to c	et address of Florida registered agent: (P.O. C T Corporation System 1200 South Pine Island Road Plantation (City) ent's acceptance: red as registered agent and to accept service application, I hereby accept the appointme comply with the provisions of all statutes reli	Box <u>NOT</u> FL of proces nt as regis	_acceptable) 33324(Zip code) s for the above stated attending agent and agrees proper and complete	corporation at the place e to act in this capacity.
Name: ffice Address: Registered ago aving been namesignated in this orther agree to c	et address of Florida registered agent: (P.O. C T Corporation System 1200 South Pine Island Road Plantation (City) ent's acceptance: red as registered agent and to accept service application, I hereby accept the appointme comply with the provisions of all statutes reli- with and accept the obligations of my positions.	Box <u>NOT</u> FL of proces nt as regis	_acceptable) 33324(Zip code) s for the above stated stered agent and agree proper and complete istered agent.	corporation at the place e to act in this capacity.
Name: ffice Address: Registered ago aving been namesignated in this arther agree to c	et address of Florida registered agent: (P.O. C T Corporation System 1200 South Pine Island Road Plantation (City) ent's acceptance: red as registered agent and to accept service application, I hereby accept the appointme comply with the provisions of all statutes reli- with and accept the obligations of my positions.	Box <u>NOT</u> FL of proces nt as regis	_acceptable) 33324(Zip code) s for the above stated stered agent and agrest proper and complete istered agent.	corporation at the place e to act in this capacity.

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: PHIL MATHEWS	□Chairman	Name: RICHARD DANIEL	
□Vice Chairman	Address:	□Vice Chairman	Address: 550 SOUTH ANDREWS AVE	
□Director	SUITE 310	□Director	SUITE 310	
□President	FORT LAUDERDALE, FL 33301	□President	FORT LAUDERDALE, FL 33301	
□Vice President		□Vice President		
□Secretary	□Treasurer	☐ Secretary	□Treasurer	
CEO/DIF	RECTOR Other	DIRECT(☑Other	OR Dother	
□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		
□ Chairman	Name:	Chairman	Name:	
□Vice Chairman	Address:	□ Vice Chairman	Address:	
□Director		□Director		
□President		□President	00	
□Vice President		□ Vice President		
☐ Secretary	□Treasurer	□Secretary	□Treasurer	
□Other	□Other	□Other	Other	
	Jse an attachment to report more than six (6). The atta added to the index when filing your Florida Department. Signature of Director of	ent of State Annual Re		
		11 1 3 3	and the second of the second o	

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 8.817.155, F.S.

13. PHIL MATHEWS, CEO & DIRECTOR

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "ACC AVIATION 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 TENTH DAY OF MARCH, 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 FRANCHISE TAXES HAVE BEEN PAID TO DATE.

2022 FEB 10 PH 2:00



Authentication: 202878514

Date: 03-10-22

7192270 8300 SR# 20220952356