

F22000002862

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

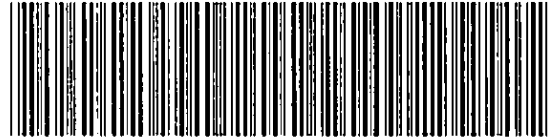
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/03/22--01015--005 **78.75

APPROVED
AND
FILED
2022 MAY -6 PM 12:14
CLERK OF COURT
JULIA A. HARRIS

MAY 09 2022
K. Brumbley



12905 SW 42 STREET Suite: 210
MIAMI, FL 33175
Phone: 305-444-4994
Email: filing@ecfsfiling.com

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBERS(S):

1. NORSE Atlantic Airways AS, Inc
(CORPORATE NAME) (DOCUMENT #)

2. _____
(CORPORATE NAME) (DOCUMENT #)

3. _____
(CORPORATE NAME) (DOCUMENT #)

☐ Walk-In

X Pick up time: _____



Certified Copy

☐ Certificate Of Status

New Filings	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	Non-Profit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Other:

Amendments	
<input type="checkbox"/>	Amendments
<input type="checkbox"/>	Resignation
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Other:

Other Filings	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Apostille:
<input type="checkbox"/>	Other:

Examiners Initials	
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**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.*

1. NORSE ATLANTIC AIRWAYS AS, INC
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. NORWAY 3. 98-1653941
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 01/01/2021 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
6. DATE OF INCORPORATION
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 5525 NW 15TH AVENUE, SUITE 202, FORT LAUDERDALE, FL 33309
(Principal office street address)
- 5525 NW 15TH AVENUE, SUITE 202, FORT LAUDERDALE, FL 33309
(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: ARAZOZA & FERNANDEZ-FRAGA P.A.

Office Address: 2100 SALZEDO STREET, SUITE 300

CORAL GABLES, Florida 33134
(City) (Zip code)

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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.

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

A. DIRECTORS

☐ Chairman Name: JAMES G. LIGHTBOURN
☐ Vice Chairman Address: 54 COVE AVE
☒ Director NORWALK, CT 06855
☒ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

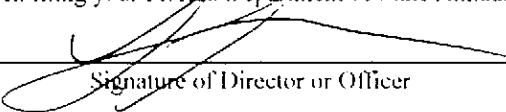
☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ 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.

12. X 
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.

13. JAMES G. LIGHTBOURN, President/Director
(Typed or printed name and capacity of person signing application)

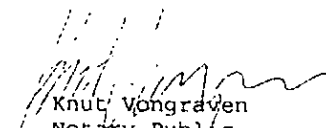


Organization number: 926 493 647
Type of company: Limited company
Date of incorporation: 2021-01-01
Registered in the
Register of Business
Enterprises: 2021-01-29
Name: NORSE ATLANTIC AIRWAYS AS
Business address: Fløyveien 14
4838 ARENDAL
Municipality: 4203 ARENDAL
Country: Norway
Share capital NOK: 300,000.00
General manager/
managing director: Bjørn Tore Larsen
Board of directors: Terje Bodin Larsen
Sandvigveien 195
4816 KOLBJØRNSVIK
Signature:
Signature separately: Terje Bodin Larsen
Bjørn Tore Larsen
Auditor: Certified auditing company
Organization number 982 316 588
RSM NORGE AS
Ruseløkkveien 30
0251 OSLO

The Brønnøysund Register Centre

The Register of Business Enterprises,
2022-04-12




Knut Vongraven
Notary Public
for the Brønnøysund Register Centre



Brønnøysundregistrene

THE BRØNNØYSUND REGISTER CENTRE

Norse Atlantic Airways As
Fløyveien 14
4838 ARENDAL

Your ref.
Ben Boiling

Our ref.
20220000976190-1 SB-LIE

Date
2022-05-02

CERTIFICATE OF GOOD STANDING


NORSE ATLANTIC AIRWAYS AS, organisation number 926 493 647

Type of company: Limited company
Date of incorporation: 1 January 2021
Country: NORWAY

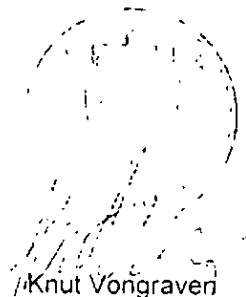
We hereby certify that the company is registered in the Register of Business Enterprises in accordance with the Business Enterprise Registration Act. The company has not been dissolved or struck off pursuant to the Limited Liability Companies Act.

BRØNNØYSUNDREGISTRENE
THE BRØNNØYSUND REGISTER CENTRE

Lise A. Dahl Karlsen
Deputy Director General
sign


Linn-Janka Ekse
Secretary




Knut Vongraven
Notary Public
for the Brønnøysund Register Centre