To: Qualification/Tax Lien Section		
Division of Corporations	Todayonadad	
SUBJECT: <u>Camel Aviat</u> (Name	of corporation - must include suffix)	1.12.70
Dear Sir or Madam:		
The enclosed "Application by Foreign Co "Certificate of Existence", and check are s transact business in Florida.	rporation for Authorization to Transact submitted to register the above reference	Business in Florida", ed foreign corporation
Please return all correspondence concerning		
<u>Robbin R.</u>	Heupel (Name of Person)	
<u>Camel Avia</u>	tion, Inc.	
000		MOCETTE
P.D. BOX	(Address)	-USY1(Y33-U11) - <del>********</del> /(),()() **
Futanilla	,	
<u> Eurawine</u>	/ <u>SC 29048</u> (City/State/Zip)	<del></del>
Should you need to call someone concerni	ing this matter, please call:	
Robbin Heupel	at (803) 492-2029	} 
(Name of Person)	(Area Code & Daytime Telepho	one Number
STREET ADDRESS:	MAILING ADDRESS:	AY 17 RETARY NHASSE
Qualification/Tax Lien Section	Qualification/Tax Lien S	Section The E
Division of Corporations 409 E. Gaines St.	Division of Corporations P.O. Box 6327	~≥ ~
Tallahassee, FL 32399	Tallahassee, FL 32314	D M O
Enclosed is a check for the following amo	ount:	
\$70.00 Filing Fee	g Fee &   \$78.75 Filing Fee &  f Status Certified Copy	☐ \$87.50 Filing Fee, Certificate of Stat

## 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. Camel Aviation, Inc (Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.) 4-23-99
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) ansportation Services 9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Name: Glenn M. Gallant t. Lauderdak , Florida, 33334 10. 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.

11. 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.

12. Name	es and addresses of officers and/or directors: (Street address ONLY - P.O. Box NO	OT acceptable)
A. DIRE	CTORS (Street address only - P.O. Box NOT acceptable)	
Chairman	·	
Address:		
Vice Chai	rman:	
Address:	·	
Director:	Douglas R. Baetz	
Address:	3020 NW 33eD Avenue	Name of the latest and the latest an
	Ft. Lauderdale, FL 33311	
	Glenn M. Gallant	
Address:	1260 E. Dakland Park Blvd	- Lines
	Ft. Lauderdale, FL 33334	
	ICERS (Street address only - P.O. Box NOT acceptable)	
President:	Douglas R. Baetz	
	3020 NW 33eD Avenue	
	Ft. Lauderdale, FL 33311	99 SE
	ident: Glenn M. Gallant	AR AY
Address:	1260 E. Dakland Park Blvd	SSE 1
	Ft. Lauderdale, FL 33334	of S
Secretary:	•	TATE
Address:		
Treasurer	Glenn M. Gallant	
Address:	1260 E. Dakland Park Blvd	
	Ft-Lauderchle, FL 33334	
<b>NOTE:</b> 13.	If necessary, you may attach an addendum to the application listing additional offi	<del>-</del> ,
13	(Signature of Chairman, Vice Chairman, or any officer listed in number 12	
14. <u>E</u>	nlenn M. Gallant, Vice President (Typed or printed name and capacity of person signing a	pplication)

## Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "CAMEL 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 IWENTY-SIXTH DAY OF

APRIL, A.D. 1999.

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.

99 MAY 17 PM 1: 15



Edward J. Freel, Secretary of State

**- AUTHENTICATION:** 

9707911

DATE:

04-26-99

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