

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY  
COMPANY  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

07 JAN 16 AM 9:17

DOCUMENT # L 02 0000 29053

1. Limited Liability Company's Name

**JETSTREAM GROUND SERVICES  
OF FT. LAUDERDALE, LC**

CR2E041 (8/05)

2. Principal Office Address

**1001 North U.S. Highway #1**

Suite, Apt. #, etc.

**Suite 504**

City & State

**Jupiter, FL**

Zip

**33477**

Country

**USA**

3. Mailing Office Address

**P.O. Box 369**

Suite, Apt. #, etc.

City & State

**Jupiter, FL**

Zip

**33468**

Country

**USA**

4. State/Country of Formation

**Florida/USA**

5. Date Organized or Qualified

To Do Business in Florida **10/31/02**

6. FEI Number

**20-8179304**

Applied For

Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☒

\$5.00 Additional Fee required  
for a Certificate of Status

**8. Name and Address of Current Registered Agent**

Name

**MARC J. DESNOYERS**

Street Address (P.O. Box Number is Not Acceptable)

**1001 North U.S. Highway #1**

Suite, Apt. #, Etc.

**Suite 504**

City

**Jupiter**

State

**FL**

Zip Code

**33477**

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

Signature of  
Registered Agent

**MARC J. DESNOYERS** AGENT MUST SIGN

Date **1/8/07**

**10. Names and Street Addresses of Managing Members/Managers**

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
		<b>SEE ATTACHED</b>	

**REINSTATEMENT 03-07**  
**000085029847**  
**01/18/07--01042--024 \*\*355.00**

11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Signature of  
Managing Member/Manager

**Marc J. Desnoyers, President**

Date

**1/8/07**

Daytime Phone # **561-746-3282**

Typed or printed name of signing Managing Member/Manager

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**Managers**

- 1) Marc J. Desnoyers  
President/Manager  
1001 North U.S. Highway #1  
Suite 504  
Jupiter, FL 33477
- 2) David N. Norris  
Chief Operating Officer/Manager  
1001 North U.S. Highway #1  
Suite 504  
Jupiter, FL 33477

**Member**

- 1) Jetstream Ground Services, Inc.  
a Florida corporation  
(100% sole member)  
1001 North U.S. Highway #1  
Suite 504  
Jupiter, FL 33477