PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.



APPROVED FILED

03 OCT 22 PH 12: 50

SCORETARY OF STATE TALUTAHASSEE, FLORIDA

1. DÖCUMENT#

L02000034398

Name and Mailing Address

0007602 01 AT 0.292 --AUTO TB 0 0615 33180-470399 Influminal Influminal Influminal AVENTURA AVIATION CREW LEASING, L.L.C. 3801 NE 207TH STREET AVENTURA FL 33180-4703



2. New Mailing Address			4. State/Country of Formation FL 5. Date Organized or Qualified To Do Business in Florida 12/19/2002			
City, State, Zip			Date Organized or Qualified To Do Business in Florida 12/19/2002			
Principal Place of Business 3801 NE 207TH STREE		3. New Principal Place of Business Address		6. FEI Number 81-0589099		
AVENTURA FL 33180	City, State, Zip	City, State, Zip		7. CERTIFICATE OF STATUS DESIRED S5.00 Additional Fee required for a Certificate of Status		
8. Name and Address of Current Registered Agent			9. Name and Address of New Registered Agent			
GAYER, HENRY 3801 NE 207TH STREET AVENTURA FL 33180		Name Street Addre	Name Street Address (P.O. Box Number is Not Acceptable)			
١	1	City	·, ·• ····	FL	Zip Code	
	REGISTERED AGENT MYST S ach Managing Mymber/Marlager Managing //Managers			Date		
President HENRY GAYER Aven		NE ZET S NTURA YLA	<u>.</u>	AvenmRA	4 33180	
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				\$		
filing this reinstatement application all fees owed by the limited liability as it made under oath.	er/manager or the receiver or trustee empithe reason for dissolution has been eliminat company have been pild. The information	ted, the limited liability co indicated on this applicati	mpany name satisfie ion is true and accura	s the requirements of section	608.406, F.S., and that ave the same legal effect	