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PLEASE REPLY TO:

NAPLES OFFICE

SUITE 200
350 FIFTH AVENUE SOUTH
NAPLES, FLORIDA 34102
(941) 262-7748
FAX (941) 262-7144

FORT MYERS OFFICE

THE TERRACES
8660 - 120 COLLEGE PARKWAY
FORT MYERS, FLORIDA 33919-4873
(941) 433-4240
FAX (941) 433-4898

July 14, 2000

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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-07/17/00--01111--011
****160.00 ****160.00

Re: International Aviation Services, LLC

Dear Sir or Madam:

Enclosed for filing please find the following documents:

1. Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida
2. Certificate of Designation of Registered Agent/Registered Office
3. Original Certificate of Existence
4. Certified Copy of Articles of Organization
5. Check in the amount of \$160.00 to cover the filing fee, designation of registered agent fee, optional certified copy and optional certificate of status

Please submit a letter of acknowledgment, certified copy and certificate of status to the address noted above in the enclosed self-addressed, stamped envelope provided for your convenience.

Thanking you for your consideration of the above and enclosed, I remain,

Very truly yours,
LOUIS X. AMATO, P.A.
Cindy J. Stubbe
CINDY J. STUBBE
For the Firm

CJS/
Enclosures

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**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN
LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

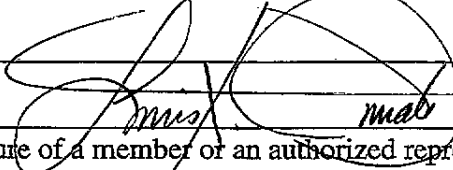
1. International Aviation Services, LLC
(Name of foreign limited liability company)
2. State of Wisconsin 3. _____
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. June 23, 2000 5. Perpetual
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6. Company has not yet transacted business in Florida
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. 2614 North Sugar Bush Road, New Franken, WI 54229
(Street address of principal office)

8. If limited liability company is a manager-managed company, check here ☐
9. The usual business addresses of the managing members or managers are as follows:

N/A

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: Landlord


Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Louis X. Amato

Typed or printed name of signee

FILED
00 JUL 17 PM 12:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES,
THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING
STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE
STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

International Aviation Services, LLC

2. The name and the Florida street address of the registered agent and office are:

Louis X. Amato
(Name)

Louis X. Amato, P.A. , 350 Fifth Avenue South, Suite 200
Florida street address (P.O. Box **NOT** ACCEPTABLE)

Naples, FL 34102
City/State/Zip

FILED
00 JUL 17 PM 12:20
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

Mus
(Signature)

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

DOM
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United States of America
State of Wisconsin



DEPARTMENT OF FINANCIAL INSTITUTIONS

To All to Whom These Presents Shall Come, Greeting:

I, RAY ALLEN, Administrator, Division of Corporate & Consumer Services, Department of Financial Institutions, do hereby certify that

INTERNATIONAL AVIATION SERVICES LLC

is a domestic limited liability company organized under the laws of this state and that its date of organization is June 23, 2000.

I further that said company has not filed articles of dissolution with this department.



IN TESTIMONY WHEREOF, I have
hereunto set my hand and affixed the official seal
of the Department on 11 Jul 2000.

A handwritten signature in black ink, appearing to read "Ray Allen".

RAY ALLEN, Administrator
Division of Corporate & Consumer Services
Department of Financial Institutions

BY:

A handwritten signature in black ink, consisting of stylized initials.

Effective July 1, 1996, the Department of Financial Institutions assumed the functions previously performed by the Corporations Division of the Secretary of State and is the successor custodian of corporate records formerly held by the Secretary of State.